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INAUGURATION OF COOPERATIVE HEALTH WORK IN CUBA

Passed Assistant Surg. M. A. Roe, of the United States Public Health Service, has been named traveling representative of the Pan American Sanitary Bureau, and has entered into active cooperation with the National Department of Health of Cuba and the Rockefeller Foundation in making sanitary surveys and in carrying out certain related activities. In connection with this work, Dr. Roe has submitted the following report:

"During the past 5 years, the Republic of Cuba has been emerging from the world-wide depression; more recently, as well, from the effects of the political events of 1933. In the Department of Public Health, officials are attempting not only to repair the immediate damage that has been done during this period of stress, but also to build for the future—to furnish the people of Cuba with the standard of public health administration to which they are entitled. Cooperation from the Pan American Sanitary Bureau and from the Rockefeller Foundation has been requested, thus making available from these organizations such specialized assistance as may be required. With a traveling representative from the Pan American Sanitary Bureau on duty in Cuba, the Bureau is in a position to cooperate not only with the Secretary of Public Health of Cuba, but also with the Rockefeller Foundation. The latter organization is now participating in the activities of the Malaria Commission of Cuba in conjunction with the Finley Institute of Habana. This recent advance of interest taken in public health activities has developed under the sympathetic administration of Dr. Aurelio Ituarte, Secretary of Public Health. Direct liaison between the cooperative agencies has been effected through Dr. Domingo F. Ramos, Director of Public Health of Cuba. who has played an important role in helping to inaugurate the program.

"A general survey of the public health needs of Cuba has been planned. Insofar as possible, this survey will include representative localities in all the provinces. Trips have already been made by interested officials to Pinar del Rio and Santa Clara Provinces. The work done has consisted in making personal contacts with the local health officers, evaluating data having to do with organization and equipment of the local departments, with general sanitary problems,

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public health laboratories, sanitation of water supplies, sewage-disposal systems, sanitary nuisances, vital statistics, infectious-disease control, clinics, and similar activities. As many personal inspections as can be made are performed at watersheds, water works, sewer plants, clinics, and other places of sanitary importance. A trained sanitary inspector from the Malaria Commission searches the immediate vicinity for the purpose of discovering the distribution and incidence of mosquito breeding, giving special attention to the occurrence of anopheline larvae. As many public schools as practicable, both urban and rural, are visited. Examinations are made of selected groups of pupils for spleen enlargement, as an indication of malarial infection; blood films are also taken when indicated. Tin boxes are left for the collection of fecal specimens in cases in which hookworm disease is evident. The boxes are picked up on the return trip or are mailed to the laboratory at Habana.

"It has been found that practical suggestions can often be applied for correcting sanitary defects as they are encountered in the field. For example, remedial measures can, in some instances, be taken for correcting overlooked contamination of water supplies. It is believed that it will be relatively easy to institute many such procedures for generally improving sanitation of water supplies, methods of excrement disposal, and measures for rodent and mosquito control. In this connection it is hoped that a certain amount of special instruction may be provided local health officers and sanitary inspectors, who, in some instances, owing to unsettled economic conditions, have not had an opportunity to acquire the desired type of training.

"The future holds unlimited promise and opportunity for the practice of public health sanitation and preventive medicine on a high plane of endeavor in Cuba. The problems that now confront health officials, if of a difficult nature, should lend themselves readily to solution with a continuation of the constructive policy of cooperation already adopted. The people of Cuba should be congratulated on the progressive stand that her health officials are taking, with the end in view of satisfying the sanitary needs of the Republic."

INFLUENZA AND PNEUMONIA MORTALITY IN A GROUP OF ABOUT 95 CITIES IN THE UNITED STATES DURING FOUR MINOR EPIDEMICS, 1930-35, WITH A SUMMARY FOR 1920-35 1

By Selwin D. Collins, Principal Statistician, and Mary Gover, Associate Statistician, United States Public Health Service

The influenza epidemic of 1918-19 is generally associated with the extraordinarily high mortality that prevailed during its course. The number of lives lost in the United States alone reached the staggering

¹ From the Office of Statistical Investigations, U. S. Public Health Service.
Some of the data in this paper were published in an article on the epidemic of the winter of 1932-33 (3).

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figure of a half-million in excess of the normal expectancy. While these facts are more or less known, the history of respiratory epidemics since the great pandemic is to many either vague or completely unknown. A study of the mortality records since 1918 reveals 10 epidemics of a more or less Nation-wide scope. These 10 outbreaks are estimated to have caused an aggregate mortality from influenza and pneumonia in the United States of about 300,000 in excess of the normal expectancy. The four minor epidemics since 1930 that form the subject of this paper account for about 50,000 of these excess deaths. If all deaths in excess of the normal were counted, the above figures would be considerably increased, because during influenza epidemics exceptionally high rates are recorded for such maladies as heart and kidney ailments, apparently because individuals with chronic diseases become easy victims of influenza (2).

CHARACTER OF DATA AND METHODS OF ANALYSIS

The present paper is based on a record of weekly deaths from influenza and pneumonia from 1930 to August 1935 in groups 2 of cities in nine geographic sections of the United States; the 15½-year period, January 1, 1920, to August 1, 1935, is summarized for the whole group of 95 cities which represent an aggregate population of approximately 30,000,000. This report supplements an earlier one on influenza and pneumonia mortality in the same group of cities for the period 1920–29 (1).

Figure 1 shows weekly death rates from influenza and pneumonia in the whole group of cities from 1920 to 1935. For epidemiological purposes, the study of a record such as that shown by the continuous line in the upper half of this figure requires the determination of some measure of the normal or expected mortality as a base line from which the excess may be computed. In the period covered by the earlier study, 1920–29, no orderly change was apparent in the level of the rates from year to year, but there was an occasional year with exceptionally low mortality. However, the difference was not great enough to make it impracticable to use the same seasonal norm for each of these years. Since 1930 the death rates from nearly all causes, including influenza and pneumonia, have been appreciably lower than in immediately preceding years, so that in deriving a normal or expected rate it becomes necessary to take account of change in level from year to year as well as seasonal variation.

The cities include some rather small places; they were selected by Jason Waterman, statistician for the Division of Sanitary Reports and Statistics of the U. S. Public Health Service, to give representation to each geographic section of the United States insofar as it was possible to find cities that reported regularly

to the Public Health Service. An earlier report (1) lists the cities.

² The publication for current weeks, of death rates from influenza and pneumonia in a group of cities and in subgroups in each geographic area was begun in the Public Health Reports for February 8, 1924 (data from Jan. 1) and was continued to August 1932, when a reduction in appropriations for printing made it necessary to discontinue the printing of these data. Subsequently the rates were carried back to Jan. 1, 1920, for as many of the cities as had available records, and published in a single article covering the decade 1920-29 (1). The present paper brings this record down to August 1935.

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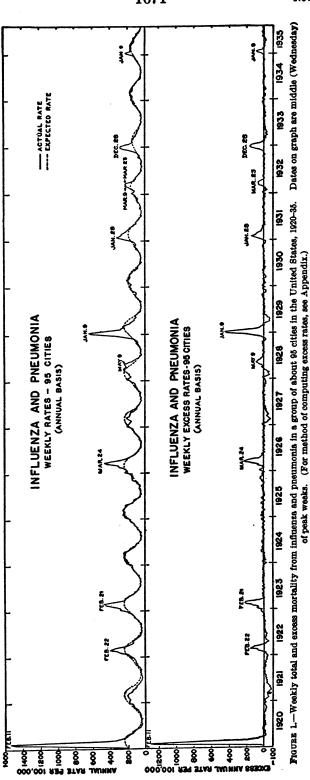
The methods of deriving the norms both before and after 1930 are summarized in the Appendix (p. 1681) for those who are interested in the details of the process. It may be seen in figure 1 that the norm represents reasonably well the usual seasonal variation and the change from year to year, inasmuch as the actual rates in interepidemic periods fluctuate within relatively narrow limits above and below the curve of expected rates.

INFLUENZA AND PNEUMONIA MORTALITY IN THE WHOLE GROUP OF CITIES, 1920-35

In the 15½ years from 1920 to 1935 (fig. 1) there were 10 brief periods in which the mortality from influenza and pneumonia was sufficiently above the seasonal expectancy to consider the prevalence of these diseases as epidemic. Each of the periods of excess mortality coincides with a time when unusually large numbers of cases of influenza were reported to health departments throughout the country.

Four of the outbreaks have occurred since 1929, which was the last year included in the earlier report (1). All four epidemics were of a minor character as compared with those of 1920 and the winter of 1928–29, but two of them (1931 and winter of 1932–33) approximate the magnitude of the intervening smaller epidemics. The minor outbreaks of the spring of 1932 and of the winter of 1934–35 occurred at times when mortality was at a low level, and the death rates for the peak weeks hardly reached the level that prior to 1930 would have been considered normal. However, as measured from the general level of mortality at the time of the outbreaks, the periods of excess deaths from influenza and pneumonia in the spring of 1932 and in the winter of 1934–35 are clearly marked.

The best single measure of epidemic mortality is probably the total excess death rate during the whole period when the mortality is above the normal seasonal expectancy. A summation of the excess rates for the various weeks of each outbreak (reducing them from an annual to an actual basis) gives the total excess influenza and pneumonia mortality; these rates are plotted in figure 2. By this measure the epidemic of the winter of 1932–33 falls fifth among the 10 outbreaks that occurred in the 15½-year period. The excess mortality was slightly greater than in the epidemic of 1922 but not as great as in that of 1926 in these same cities. The epidemic of 1931 had a total excess that was slightly less than that of 1922 but greater than the small outbreak of the spring of 1928. The epidemics of the spring of 1932 and of the winter of 1934–35 were the two smallest of the 10 that have occurred since 1920.



EPIDEMICS SINCE 1930 IN CITIES OF EACH GEOGRAPHIC AREA

Excess influenza and pneumonia mortality was computed for groups of cities in each of the 9 geographic areas of the United States. Figure 3 shows these weekly excess rates from 1928 to 1935 for each region. The chance fluctuations are particularly large in the East and West South Central and the Mountain areas, where the populations under consideration are small; but even in these sections the excess rates during real epidemics stand out clearly above the usual chance variations.

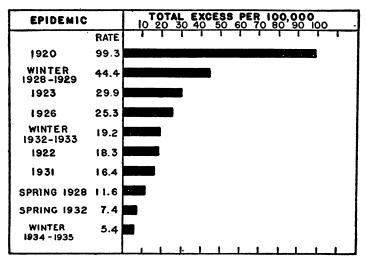


FIGURE 2.—Total excess mortality from influenza and pneumonia during the whole of each epidemic in a group of about 95 cities in the United States, 1920-35. (For method of computing excess rates, see Appendix.)

Table 1.—Total excess 1 death rate (actual basis) per 100,000 from influenza and pneumonia during the whole of each epidemic in cities of different geographic sections of the United States, 1920–35

Epidemic	All cities	New Eng- land	Middle Atlan- tic	South Atlan- tic	East North Central	East South Central	West North Central	West South Central	Moun- tain	Pacific
1920 1922 1923 1923 1926 Spring 1928 Winter 1928–29 1931 Spring 1932 Winter 1932–33 Winter 1934–35	99. 3 18. 3 29. 9 25. 3 11. 6 44. 4 16. 4 7. 4 19. 2 5. 4	96. 6 29. 5 36. 6 30. 0 15. 4 42. 3 13. 8 None 22. 8 8. 1	95. 2 24. 7 26. 5 41. 2 20. 9 43. 0 24. 3 13. 5 18. 1 5. 3	94. 2 9. 4 42. 7 26. 2 None 47. 6 27. 2 8. 0 22. 1 14. 5	109. 4 11. 4 32. 2 22. 2 17. 9 43. 7 9. 7 4. 6 13. 8 6. 3	99. 1 16. 0 44. 0 38. 2 11. 9 92. 0 None 8. 6 33. 9 28. 3	121. 9 34. 8 53. 3 None 4. 9 42. 8 14. 0 19. 4 42. 7 11. 1	91. 2 14. 6 6. 7 58. 8 13. 7 68. 2 17. 7 7. 2 41. 1 10. 7	159. 5 36. 2 17. 6 16. 8 7. 7 68. 7 None 24. 1 34. 7 13. 4	57. 7 36. 3 11. 3 9. 3 None 43. 0 None None 16. 7 None

¹ From 1920 to 1929, inclusive, the excess is measured from the median rates for corresponding weeks for the period 1921-27; the series of 52 medians representing the "normal" or "expected" rates for the different weeks of the year were smoothed by a 5-week moving average before the excesses were computed. From 1930 to 1935, inclusive, the excess is measured from "normal" or "expected" rates that are based on means for corresponding weeks for the period 1930-33, rates for obviously epidemic weeks being replaced by interpolations between adjacent nonepidemic weeks before computing the means. See Appendix for further details.

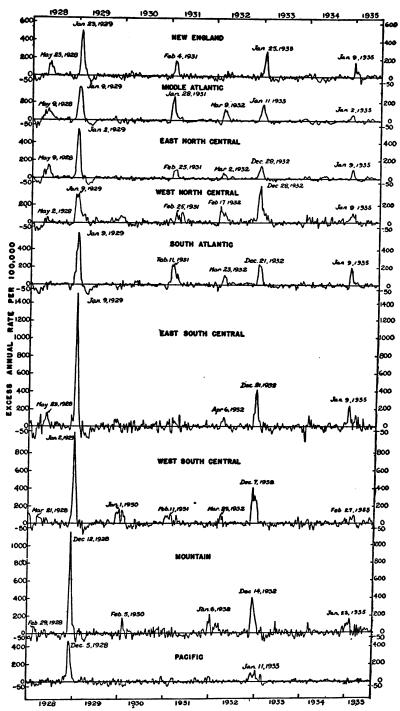


FIGURE 3.—Weekly excess mortality from influenza and pneumonia in a group of cities in each geographic section of the United States, 1928-35. Dates on graph are middle (Wednesday) of peak weeks. (For method of computing excess rates, see Appendix.)

To supplement figure 3, table 1 shows the total excess rates from influenza and pneumonia during the whole of each epidemic in each area. The mortality picture is generally similar in the various regions, but a close examination of the chart and table reveals the following variations in the several areas: (a) On the whole the epidemic of 1928-29 is far greater than any since that time; but in one area, the West North Central, the peak rate in the outbreak of 1932-33 exceeded that of 1928-29 and the total excess rates were almost identical. (b) In general the epidemic of the winter of 1932-33 was greater than that of 1931, but in the cites of the Middle and South Atlantic regions the latter was larger than the former. For the group of cities taken as a whole, the outbreak of the winter of 1934-35 is the smallest one, but the East South Central cities exhibit a total excess rate that equals that of any area in the considerably larger epidemic of 1931. (d) Small outbreaks appear in certain sections when there is no indication of an epidemic elsewhere, viz, the West South Central, with a peak in January 1930 when, with the possible exception of a peak in February in the Mountain cities, there is no other indication of an outbreak in 1930. There was also an outbreak in the West South Central cities with its peak in January 1925, when no other region showed a definite epidemic (1); however, both cases and deaths from influenza were reported in 1925 in greater than the usual frequency in other places without a definite peak. These variations suggest that individual cities have minor outbreaks that do not progress to a nation-wide epidemic.

The area of origin and the direction of spread as well as the magnitudes of the epidemics are shown for the four outbreaks since 1930 in figures 4, 5, and 6. The excess rates have been plotted for each geographic area for each epidemic. The sections are arranged in the order of occurrence of the peak mortality as indicated by a 3-week moving average of the weekly excess rates, and a vertical line has been drawn at the estimated peak ³ day for the whole group of 95 cities.

In figure 7 the time of occurrence of the epidemics in each geographic area is illustrated on maps. The areas are shaded from dark to light in the order of the estimated date of the peak mortality. In addition to the estimated modal or peak day, table 2 gives certain other constants of the curves of excess mortality in each epidemic, viz, the dates on which one quarter, one half, and three quarters of the

³ The estimated peak day is computed from the 3-week moving average curve by an adaptation of the difference formula for calculating the mode in a frequency distribution; see footnote to table 2 for the formula and methods of computation.

excess deaths had occurred, and the interquartile range of the number of days within which the central half of the excess deaths occurred. The weekly excess death rates for each of the 9 areas for the years 1930 to August 1935 are shown in tables 3 to 7 in the Appendix.

In the outbreak of 1931 the West South Central cities were the earliest affected; the excess curve is rather flat, with a maximum, as judged by the moving average, about the middle of January (fig. 4). However, neither the Mountain and Pacific areas to the west nor the East South Central area to the east of the affected region showed any recognizable epidemic, and the small excess in the West North Central section to the north came about six weeks later, at a time that indicated a spread from the east rather than from the south. Aside from this early but small excess in the West South Central region, the 1931 epidemic manifests itself as definitely an east coast outbreak with its origin in the Middle Atlantic region from which it spread to the south, north, and west, but with only small excess rates in the two North Central regions. In the three regions on the Atlantic coast the mortality is definitely above the normal expectancy and the peaks are sharply defined.

The minor outbreak of the spring of 1932 originated in the Mountain section and spread eastward. The curve of excess rates for the Mountain area is distinctly bimodal, probably because of the widely scattered cities that represent that region. The Mountain, West North Central, and Middle Atlantic areas had the largest total excess rates, and the Pacific and New England sections showed no evidence of an epidemic.

The outbreak of the winter of 1932-33 was of greater magnitude than the two outbreaks previously described. The West South Central section had the earliest peak, and from there it spread rapidly to the west, east, and north. With the exception of the Pacific area, all regions show sharply defined peaks. The highest total excess mortality occurred in the West North Central and West South Central areas, with high rates also in the Mountain and East South Central sections.

The epidemic of the winter of 1934-35 is characterized by its small size, its definiteness in all areas except the Pacific, and the rapidity of its spread. The Middle Atlantic section attained its peak in the week ending January 5, and five neighboring sections had peak mortalities during the succeeding week. The West South Central and the Mountain areas had later and less definite peaks. The largest total excess rates occurred in the East South Central, South Atlantic, and Mountain regions.

⁴ Because of variation in the size of the several regions and in the number and geographic scatter of the cities whose records are included in the data, the interquartile range is not strictly comparable from one section to another. However, the usually short interquartile range (generally 2 to 3 weeks) indicates that the majority of the excess deaths take place within a very short period during which the disease is truly epidemic.

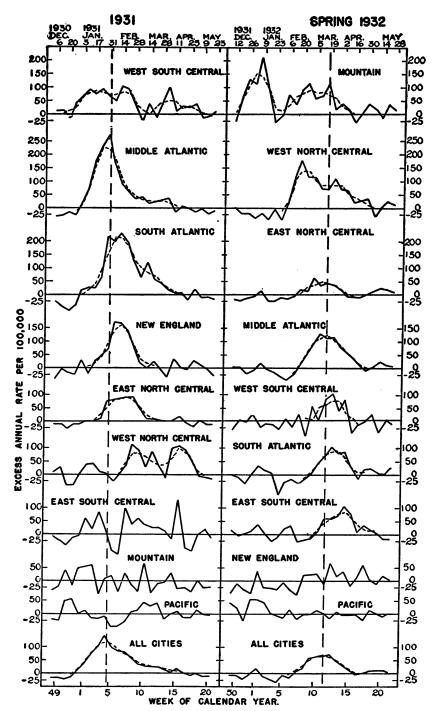


FIGURE 4.—Weekly excess mortality from influenza and pneumonia in a group of cities in each geographic section of the United States during the epidemics of 1931 and of the spring of 1932. Continuous line represents actual excess; broken line, 3-week moving average. Sections arranged in order of dates of peak mortality as indicated by the moving average curve.

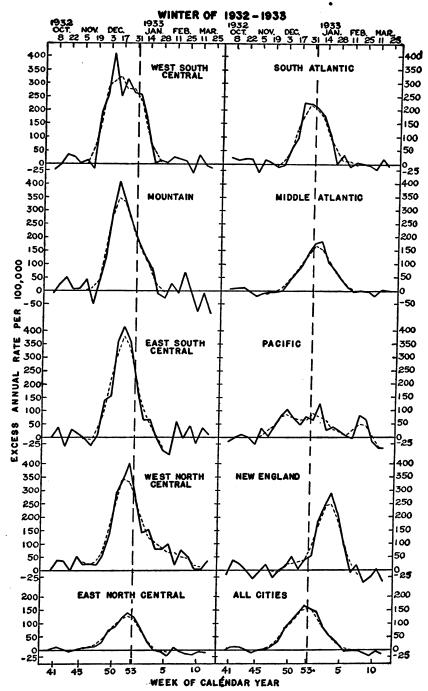


FIGURE 5.—Weekly excess mortality from influenza and pneumonia in a group of cities in each geographic section of the United States during the epidemic of the winter of 1932-33. Continuous line represents actual excess; broken line, 3-week moving average. Sections arranged in order of dates of peak mortality as indicated by the moving average curve.

TABLE 2.—Estimated constants of the curves of excess mortality from influenza and pneumonia in epidemics in cities of different geographic sections of the United States, 1930–35

		propor	which the tion of the had occurr	he excess		Total r conside above n	red as
Year of epidemic and geo- graphic section	Mod lor peak day ¹	One- fourth (first quartile) ²	One-half (median)?	Three- fourths (third quartile) ²	Interquartile range (num- ber of days be- tween first and third quartiles)	Total number of weeks	Dates (in cal- endar weeks) of first and last week
All cities New England Middle Atlantic South Atlantic East North Central West North Central West South Central Mountain	Feb. 10 Jan. 24 Feb. 7 Feb. 16 Feb. 28 Jan. 14	Jan. 24 Feb. 2 Jan. 19 Feb. 1 Feb. 4 Mar. 3 Jan. 13	Feb. 4 Feb. 9 Jan. 28 Feb. 12 Feb. 14 Mar. 25 Feb. 4	Feb. 22 Feb. 17 Feb. 9 Feb. 26 Feb. 24 Apr. 16 Feb. 22	29 15 21 25 20 44 40	16 8 14 16 10 None 11 16 None	1-16 3-10 1-14 1-16 3-12 8-18 52-15
Pacific	Mar. 16 Mar. 15 Mar. 27 Mar. 9 Apr. 4 Feb. 20 Mar. 26	Mar. 6 Mar. 18 Mar. 2 Mar. 24 Feb. 18 Mar. 15 Jan. 3	Mar. 16 Mar. 27 Mar. 25 Mar. 10 Apr. 4 Mar. 3 Mar. 22 Feb. 1	Mar. 26 Mar. 28 Apr. 3 Mar. 19 Apr. 12 Mar. 24 Apr. 1 Feb. 29	20 21 16 17 19 35 17 57	9 None 10 7 7 10 13 6 17 None	8-16 8-17 10-16 8-14 11-20 6-18 10-15 51-15
Winter 1952-53 All cities	Jan. 23 Jan. 5	Dec. 18 Jan. 13 Dec. 26 Dec. 22 Dec. 14 Dec. 13 Dec. 18 Dec. 10do	Dec. 30 Jan. 22 Jan. 5 Dec. 30 Dec. 25 Dec. 21 Dec. 29 Dec. 18 Dec. 18 Jan. 2	Jan. 10 Jan. 29 Jan. 14 Jan. 9 Jan. 4 Dec. 29 Jan. 15 Dec. 29 do Jan. 22	23 16 19 18 21 16 28 24 19	11 10 11 9 12 9 15 8 9	48- 5 50- 6 49- 6 50- 5 46- 4 48- 3 48- 9 48- 3 48- 9
Winter 1934-35 All cities. New England Middle Atlantic Bouth Atlantic East North Central East South Central West North Central West North Central West South Central Mountain Pacific	Jan. 10 Jan. 7 Jan. 8 Jan. 6 Feb. 25 Jan. 26	Dec. 30 Jan. 8 Dec. 18 Jan. 6 Jan. 1 Jan. 3 Dec. 27 Dec. 31 Dec. 29	Jan. 6 Jan. 14 Dec. 28 Jan. 12 Jan. 7 Jan. 15 Jan. 9 Feb. 7 Jan. 15	Jan. 12 Jan. 29 Jan. 5 Jan. 22 Jan. 14 Feb. 24 Jan. 24 Feb. 25 Jan. 29	13 21 18 16 13 52 28 56 31	9 7 9 10 7 17 14 15	49- 5 1- 7 47- 3 52- 9 51- 5 48-12 47- 8 48-10 48- 6

¹ The modal or peak day was estimated by interpolation within the modal or peak week (determined by inspection) of the excess death rates by the method of differences, the following formula being used:

The computations are based on the 3-week moving average of the excess rates rather than the actual value. The median and quartile days were determined in the manner in which those constants are determined for a frequency distribution (the excess rates for this purpose being considered as frequencies).

First and second differences (\triangle and \triangle^z , respectively) for use in the formula are computed as follows: $\triangle f_{-1} = f_0 - f_{-1}$. $\triangle^t f_{-1} = (f_{+1} - f_0) - (f_0 - f_{-1})$. The expression in the formula which is added to the lower limit of the modal class always comes out in the form of a fraction or decimal less than unity and is in usual frequency distributions multiplied by the class interval and added to the lower limit of the class. This was adapted to the weekly intervals by reducing this decimal to sevenths; if it was less than one-seventh, the estimated modal day was the first day of the week; if it was between one-seventh and two-sevenths, the modal day was the second day of the week; if it was between one-seventh and two-sevenths, the modal day was the second day of the week, etc.

SUMMARY

Weekly records of mortality from influenza and pneumonia in a group of about 95 cities in the United States indicate 10 epidemic periods in the 15½ years from 1920 to August 1935 (fig. 1). Measured by the total excess mortality from influenza and pneumonia during

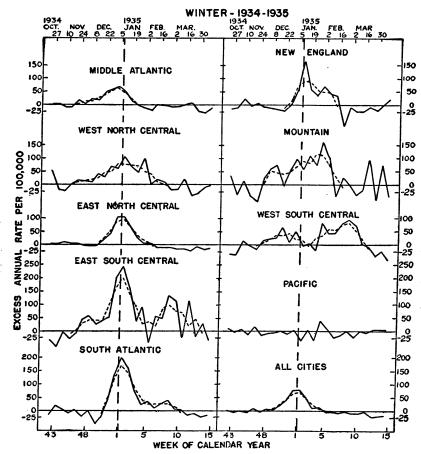


FIGURE 6.—Weekly excess mortality from influenza and pneumonia in a group of cities in each geographic section of the United States during the epidemic of the winter of 1934-35. Continuous line represents actual excess; broken line, 3-week moving average. Sections arranged in order of dates of peak mortality as indicated by the moving average curve.

the whole epidemic, the largest outbreak in this period was in 1920 and the smallest in the winter of 1934-35 (fig. 2).

The four epidemics in the years 1930-35 are relatively small; those of 1931 and the winter of 1932-33 are about the magnitude of the outbreak of 1922. The epidemics of the spring of 1932 and of the winter of 1934-35 are the smallest of the 10 outbreaks. Although the epidemics since 1930 are small, they are clearly defined in the curves for all cities and in those for the separate geographic sections that were affected.

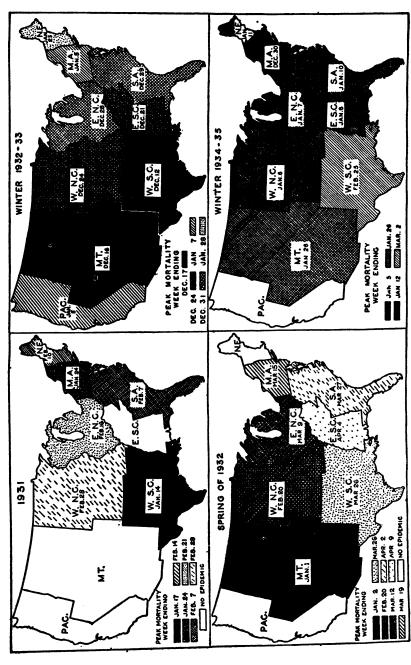


FIGURE 7.—Time of occurrence of peak mortality in 4 influence apidemics in a group of cities in each geographic section of the United States. (Darkest sections were first and lightest sections were last to be affected. Dates represent estimated peak days for the sections. For details see footnotes to table 2.)

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In the epidemic of 1931 the excess rates were highest in the east coast regions, and the Mountain and Pacific sections were unaffected (fig. 4). The outbreak of the spring of 1932 did not affect the Pacific or the New England area (fig. 4). The epidemic of the winter of 1932-33 prevailed in all regions, but the excess rates were low in the Pacific cities (fig. 5). The outbreak of the winter of 1934-35 was largest in the eastern sections, but all areas except the Pacific were definitely affected (fig. 6).

APPENDIX

METHOD OF DERIVING NORMAL OR EXPECTED RATES

The norm used for the years 1920-29 was based on median rates for each week for the 7-year period 1921-27; the 52 weekly medians were smoothed by a 5-week moving average and used for the whole 10-year period without adjustment for change in average annual level of the rates. A more detailed description of the process is included in the earlier paper (1).

Since 1930 the death rates from influenza and pneumonia have been lower than in the preceding decade. The curve of weekly median rates for the period 1921-27 becomes impossible as a norm for the years 1930-34, as it is generally above corresponding weeks of these years except in obviously epidemic periods. Adjustment of the old norm (the series of 52 median rates) to the level of the year under consideration did not make it satisfactory for the new period. It, therefore, seemed advisable to derive a norm from the years following 1929. The analysis was begun before the 1934 data became available, and so there were only 4 years, 3 of which included small epidemics. Under these circumstances a median did The best solution seemed to be to replace obviously epidemic not seem feasible. items by interpolated values and to compute the mean of the rates for corresponding weeks in the 4 years 1930-33. The values substituted for the obviously epidemic rates were obtained by an interpolation between the apparently normal rates just before and after the epidemic periods. The process was to select (by inspection and the aid of the old seasonal curves) the last week preceding the epidemic items and the first week after them that seemed to be approximately normal for the season of the year, and to interpolate on a linear basis between these points. For the whole group of cities, this process involved interpolating between the following weeks:

Winter of 1930-31: From 52d week of 1930 to 11th week of 1931; 10 epidemic weeks replaced by estimated normal values.

Winter of 1931-32: From 8th to 16th week of 1932; 7 epidemic weeks replaced by estimated normal values.

Winter of 1932-33: From 47th week of 1932 to 5th week of 1933; 10 epidemic weeks replaced by estimated normal values.

Although in the 4 years 1930-33 there were 3 epidemics which involved interpolations, they are sufficiently separated in season of occurrence so that interpolated values overlap only 2 weeks as between the first and second epidemics, and only 4 weeks as between the first and third epidemics, while the second and third outbreaks do not overlap at all. Thus there are 6 of the 52 weeks in which 2 of the weekly rates entering into the 4-year average are interpolated values, and 13 other weekly means involving 1 interpolated value and 3 actual values.

The 52 weekly values in these 4-year means obtained as outlined above were smoothed by a 5-week moving average and used as the relative basis for seasonal

expectancy. However, adjustment had to be made for the change from year to year in the average annual influenza and pneumonia death rate. For each of the years ending approximately July 31 (31st week) ratios were computed by dividing the mean of the 52 weekly rates for the year (using the interpolated values for the obviously epidemic weeks) by the mean of the 52 weekly values in the seasonal norm. Each of the 52 weekly values in the seasonal norm were then multiplied by this ratio to adjust the level of the seasonal norm to that of the individual years under consideration. Thus, if the mean for the given year was smaller than the mean of the seasonal norm values, the ratio would be less than unity and the norm would be lowered to the general level of the nonep demic rates in the year under consideration. On the other hand, if the mean for the given year was larger than the mean of the seasonal norm values, the ratio would be greater than unity and the norm would be raised to the general level of the nonepidemic rates in the year under consideration. Excess rates were obtained by subtracting these expected rates from the actual rates for corresponding weeks of the year.

Tables 3 to 7 include columns of smoothed mean rates (interpolated values replacing epidemic items), and the footnotes contain for each year the ratios by which these seasonal norms are multiplied to adjust to the general leve for the year. Thus an expected rate for each week of each year can be computed from the data in the tables, and the actual rates can be obtained by adding algebraically the expected and excess rates or given weeks.

Table 3.—Excess weekly death rates (annual basis) per 100,000 from influenza and pneumonia, 1930–1935

	Abou	ıt 95 c	ities¹ i	in the l	United	State	S	About 12	cities	in th	e Nev	v Engl	and S	tates
Week of year	Smoothed mean (1930–33) *	1930	1931	1932	1933	1934	1935	Smoothed mean (1930–33) ³	1930	1931	1932	1933	1934	1935
											I			
1 2 8 4 5	146 153 160 163 165	+18 +9 -11 -24 -4	+13 +38 +76 +99 +145	-3 +18 -10 -21 -33	+156 +142 +82 +51 +32	+19 +10 -5 -12 -13	+75 +78 +45 +7 +12	136 136 141 144 146	+26 +26 -25 -17 +25	+27 -21 +25 +43 +70	-47 +35 -23 -28 -32	+53 +183 +245 +289 +217	+51 +29 +35 -9 +3	+48 +160 +53 +31 +65
6 7	170 175	-3 -6	+101 +84	-6 -14	0 -3	-16 0	-5 -6	156 166	-15 +5	+173 +168	-6 -36	+89 -11	+30 +53	+34 +28
8	177	-2	+ 79	+8	+1	-i	-10	174	+53	+141	52	+20	+21	-87
9 10	179 179	$^{+11}_{-20}$	+62 +38	+23 +58	$-11 \\ -22$	+1 -1	-5 -13	178 180	+36 +30	+78 +20	+23 +24	-47 -28	$-5 \\ -12$	-14 -30
11 12	175	-24	+30	+66	-5	-17	-13	180	-33	-1	+28	+7	-36	-30
12	170 166	-15 -11	+26	+66	$-16 \\ -35$	-20 -10	-8 -26	174	+17	+24 -3	-13	-42 -43	-39 -46	-8 -25
14	159	-6	$^{+24}_{-16}$	+73 +47	-35 -19	-10	$-20 \\ -21$	170 161	+31 +3	-35	+67 +17	-9	-40 -44	-20 -2
15 16	152	+11	+3	+33	-19	Ó	-17	155	+14	+34	+38	-28	-8	+23
47	143 135	+3	+18	$^{+10}_{-2}$	-27 -19	+1 +9	$-3 \\ -2$	148 142	-4 +34	-6	-16 +12	-23 -53	-1 +7	+18 +4
18	125	+4	-8	+1	-17	-1	+23	131	+16	+27 +10	+61	-34	-24	$^{+17}_{-21}$
19	116	+13	-1	+9	-12	+9	+8	123	-1	+10	+5	-8	-17	
20	107 99	-12 -5	-9 -9	$^{+12}_{+12}$	-7 -8	+2 +7	+8 +5	115 102	-20 -4	$-2 \\ -27$	-13 +20	+23 -2	-51 -1	+21 -9
22	91	-21	+6	+6	-10	+8 +3	+15	94	-10	+25	+4	-12	+1	L14
23	84 77	-6	-2 -7	+3	-4	+3	+20	85	-17	+35	+9	-26	-26	+30
25	71	+2 -4	-7 -2	+5	$^{+1}_{-2}$	-7 -14	+12 +8	78 67	+1	-20 +4	+9 +15	$+16 \\ -12$	-25 -4	+16 + 18
18 19 20 21 22 22 23 24 25 26	65	-4	$-\bar{2}$	+1	-ī	-9	+3		-16	ő	+5	+12	-8 l	-14

¹ Excess over a "normal" or "expected" rate for the corresponding week of the year. For details, see note 3 and the appendix.

³ See earlier report (1) for a list of the cities in each geographic area. When a city failed to report, its population was deducted from the group total and the rate computed on the remaining population. Because of continued irregularity of reports, Norfolk, Va., Greenville, S. C., Louisville, Ky., and St. Louis, Mo., are omitted from the years 1930-35 and Covington, Ky., is omitted from the years 1933-35.

³ The series of "smoothed means" shown in tables 3 to 7 for the different geographic areas are based on

³ The series of "smoothed means" shown in tables 3 to 7 for the different geographic areas are based on the means of the 4 weekly death rates for corresponding weeks of the 4 years 1930-33; rates for obviously epidemic weeks were replaced by interpolations between adjacent nonepidemic weeks before computing the means. The 52 weekly means were then smoothed by a 5-week moving average. To adjust these smoothed means to the level of the rates in a given year and obtain the series of weekly "normal" or "expected" rates used for that year, multiply the smoothed means by the following factors:

Table 3.—Excess weekly death rates (annual basis) per 100,000 from influenza and pneumonia, 1930-1935—Continued

	Abo	ut 95 c	ities i	a the U	nited	States		About	12 citie	s in th	e New	Eng	land St	ates
Week of year	Smoothed mean (1930-33)	1930	1931	1932	1933	1934	1935	Smoothe mean (1930–33	1930	1931	1932	1933	1934	1935
27 28 29 30 31 32 33 34 55 36 37 40 41 42 43 44 45 46 47 48 49 50 51 51 55 53 55 56 57 58 58 58 58 58 58 58 58 58 58	55 52 50 49 49 49 50 51 53 54 57 61 67 74 81 89 97 102 106 111	-9 -5 -13 +2 -3 +1 +1 -6 +1 +1 -1 -1 +1 -3 -5 +3 +1 +1 +1 +1 -3 -3 -4 +4 +11 +12 -3 -14 -12 -13 -14 -13 -14 -14 -14 -14 -14 -14 -14 -14 -14 -14	+1 -9 -11 +4 +2 +4 +3 +4 +12 +12 -11 -5 0 -3 +4 +2 +9 +12 -11 -12 -6 -6 -19 -19	+11 -2 +5 +4 +3 +16 +3 +12 +13 +12 +33 +80 -10 +13 +107 +137 +164	-4 +3 +22 -3 +22 -4 +14 +1	-8 -1 -2 +8 +1 -4 0 -3 -2 +2 +0 +2 +7 -1 +3 +1 +1 -1 -2 +1 +1 +1 -1 -1 -1 -1 -1 -1 -1 -1 -1 -1 -1 -1 -1	+3 +7 +2 0 -5	55 54 44 44 44 42 43 43 43 45 45 53 67 76 82 89 93 94 95 103 109 113 123 133	1	-21 +30 +22 -17 -2 -7 -14 -5 +2 -22 +11 +3 -4 +10 -1 -32 +9 -17 -17 +18 -7 -7 -19 -4 -10 -36	+4 +2 +33 +16 -4 +7 +7 -7 +1 +22 -10 +12 -4 -9 -32 -5 +24 +33 +24 +3 -4 -4 -32 -5 +24 +3 +35 +35 +45 +45 +45 +45 +45 +45 +45 +45 +45 +4	-3 0 +5 -99 +21 +6 -88 +4 -5 -11 +17 -10 -42 +24 +5 +1 +18 +18 +30 +30 +21 +22 +24 +31 +22 +24 +32 +32 +32 +32 +32 +32 +32 +32 +32 +32	+12	-10 +1 +26 0 0 -14
Geogra	aphic sectio	n	1930	veek of to 31st of 1930	1930	to 31st	1931	week of to 31st k of 1932	1932 to	31st 1	933 to	31st	32d wee 1934 to week of	31s t
All cities	ndntic tic Central Central Central Central			1. 1543 1. 0581 1. 1792 1. 0326 1. 2116 1. 3097 1. 0443 1. 2144 1. 1091 1. 1258		1. 1164 1. 0202 1. 1750 1. 1751 1. 1200 1. 2396 1. 0925 1. 0734 1. 1417 1. 0657		0. 9382 1. 0269 . 9008 . 9508 . 9407 . 8021 . 9452 . 8718 . 9128 1. 0072	.8 .8 .7 .9	604 565 014 541 422 653 920 589 842 552	1. 0 .9 1. 0 1. 0 1. 0 .9	7729 1902 1371 1141 1470 1367 7799 896 050 204	1. 1. 1. 1.	9493 0174 8331 0299 0482 9098 0693 0317 9448 8918

The details of the method of deriving the smoothed means and this series of multiplying factors are given above in the Appendix.

Table 4.—Excess weekly death rates (annual basis) per 100,000 from influenza and pneumonia, 1930–35

				<i>w</i> 100	* piec	u meo	,	1000-00						
	About 10	cities	in the	Midd	le Atla	ntic S	tates	About 21	cities	in th	e Sout	h Atla	ntic S	tates
Week of year	Smoothed mean (1930–33) ³	1930	1931	1932	1933	1934	1935	Smoothed mean (1930–33) ³	1930	1931	1932	1933	1934	1935
•	150		1.10		1 177		100	100	1.27	1.17	1.0	1.010	-	1 120
2	153 158	$^{+11}_{+20}$	+19 +76	-7 +18	+177 + 184	$^{+12}_{+6}$	$^{+65}_{+48}$	196 207	+37 -6	+17 +28	+6	+210 +180	-5 0	$+139 \\ +202$
8	165	-13	+176	-4	+104	-17	+13	216	-31	+24	+34 +15	+111	+9	+162
4	167	-48	+227	-16	+78	-18	-6	215	+5	+65	+6	+3	-3	+71
<u>5</u>	168	-17	+272	-31	+41	-19	-16	217	+5	+217	-78	+36	+5	+25
6	173	$-3 \\ +4$	$+158 \\ +90$	-44 -26	+9 -5	$ -25 \\ -5$	-22 +1	219 221	-17 -3	$+197 \\ +231$	-27 -18	-10 +5	+1 +1	+38 +11
8	181 184	 1	+62	+9	-3	+6	-3	225	_9	+198	-33	l Tö	-29	+28
9	189	+24	 -35	+53 +93	-3	+5	-12	230	+4	+121	-15	-6	+39	+41
10	189	-19	+39	+93	-19	+14	-11	232	-4	+65	+8	-23	-4	-+8
11	186	-3	+18	+120	+3	-19	-3	230	-43	+119	+44	+21 -13	$-22 \\ -22$	+4
12 13	183 179	-34 -3	+24 +30	$+112 \\ +118$	$-1 \\ -31$	-28 -24	+5 -28	222 215	0 -13	+57 +42	+71 +104	-30	-22 -7	-14 -19
14		+5	+37	+81	-4	-11	-31	204	- 25	+20	+80	-28	+i	-23
15	167	+19	-16	+59	-13	+9	-13	190	+39	+6	+84	+13	-5	-15
16	160	+16	+4	+41	-6	+3	-4	181	+18	+7 -21	+24	-31	+10	-30
17 18	152 144	$-2 \\ +12$	$\begin{vmatrix} -2 \\ -16 \end{vmatrix}$	+9 -7	-14 -3	+6 -3	+29	169 154	$^{+28}_{+43}$	-21 + 19	$-14 \\ +22$	$-21 \\ -23$	+8 -7	+2 +30
19		+35	-5	+5	-17	-3 -1	+15	139	-18	-11	+23	-26 -26	+29	-10
20		-12	-20	+25	-7	-11	-8	128	+42	-8	+6	-29	-14	+32
21	117	+7	-11	+11	-1	+15	+11	113	-11	-18	+1	-27	-11	-13
22		-28	-14	+5	+1	-2	+23	104	-21	+28	+31	-25	-13 -20	
23 24		$-4 \\ +2$	-7 -11	$^{-1}_{+20}$	+8 +5	+2 -13	$^{+31}_{+17}$	94 89	+5 -17	$-19 \\ -16$	+23 +23	$-2 \\ -2$	-20	+20 +19
25	80	-7	-14	+8	+1	-18	+5	79	-16	ŏ	+9	+7	+4	+24
26	73	-9	-8	+2	+6	-17	+3	72	-3	+24	+11	-11	0	-4
27		-15	-8	+6	-4	-23	+1	65	-7	-5	-8	-19	+14	-1
28 29	61 59	$-11 \\ -11$	-9 -8	$+10 \\ -6$	+9 -5	$-10 \\ -12$	+4 -1	62 59	$-7 \\ -12$	+2 -26	+8 +7	-2 +6	+39 +14	-6 -18
30	57	+6	-11	+2	+11	-9	_i	62	+19	-28	+16	-5	+15	-15
31		-4	-3	-3	+16	+1	$-1\bar{2}$. 62	+1	-2	-2	+3	-8	-4
32	56	-5	+5	0	+4	-8		61	+3	+21	+21	-3	-22	
83	56	+8	+9	-2 +4	+5 -9	$\begin{vmatrix} 0 \\ -2 \end{vmatrix}$	 -	61	$-4 \\ -18$	+3	+1 -10	-9 -30	$-2 \\ -21$	
35	56 57	-8 -4	+8 +11	+6	-9	-2 0	-	62 60	-18	$^{+10}_{+18}$	+10	-30 -7	_i	
36		+4	+12	+6	-4	+1		61	-3	+5	+7	+12	+3	
37	59	+2	+16	+1	-5	-4		64	-20	+4	+14	-9	-4	
38	60	-1	+15	-6	-6	+1 +7		63	-23	+1	+21 +30	+9 +5	+25	
3 9 4 0	62	+5 -13	0 +4	+1 +5	0 +6	+7 -6		66 69	$-23 \\ -31$	-8 -5	+30 -16	+5 -4	+1 + 2	
41	74	-13 -2	T	 	70	+3		75	-31 -7	-3 +8	+22	+2	+23	
42	81	-17	-4	+10	+15	+3		86	-8	+5	+15 +19	-56	+1	
43	89	+10	. 0	+13	+23	+1		99	+13	-17	+19	-24	-16	
44	99	+8	+11	-3 -19	-10	+1		110 126	+10	+12	+20 -30	+10	+22 +5	
45 46	108 112	+8 +13	+18 +15	-19 -11	+6 +23	-10 -9		137	+1	$^{+1}_{-27}$	-30 +18	-3 -1	-10	
47	116	+12	+18	-6	+25	+15		143	-3	+28	+6	+31	+4	
48	119	-4	0	5	+29	0		153	-6	-17	-9	+16	-23	
49	122	-30	-11	+3	+31	+20		158	-24	+2	-3	+2	0	
50	123 131	-28 -16	+5 +4	+40 +65	+30 +29	+15 +43		161 174	-44 -60	$-1 \\ -11$	+58 +97	+48 +22	-50 -22	
52	143	-25	-21	+95	+16	+56		186	-38	-33	+229	+5	+39	
83			<u></u>	+146							+225			
				<u> </u>							L			

Table 5.—Excess 1 weekly death rates (annual basis) per 100,000 from influenza and pneumonia, 1930-35

	About 16	citie:		the Eastates	st Nor	th Ce	ntral	About	6 citie		the Ea	st Sou	th Cen	tral
Week of year	Smoothed mean (1930-33) 3	1930	1931	1932	1933	1934	1935	Smoothed mean (1930-33) *	1930	1931	1932	1933	1934	1935
1	123 130 144 144 144 136 130 114 107 99 92 85 80 74 62 53 49 44 40 38 36 34 33 34 33 34 35 39 41 44 48 39 41 48 53 59 64 74 78	+11-15-16-7-19-11-12-33-6-29-7-4-2-1-2-1-1-1-2-1-1-1-1-2-1-1-1-1-1-1-1	$\begin{array}{c} -10 \\ -11 \\ +174 \\ +184 \\ +191 \\ +174 \\ +184 \\ -191 \\ +191 \\ -191$	-5 +15 -22 -29 -14 -19 +19 +12 +38 +45 +45 +45 +45 +45 +419 -7 -8 +4 +15 +21 +16 +17 -4 -17 -4 -17 -4 -17 -4 -17 -4 -17 -4 -19 -19 -19 -19 -19 -19 -19 -19 -19 -19	+123 +81 +122 +96 -166 -167 -209 -167 -209 -167 -209 -167 -209 -167 -209 -167 -209 -167 -209 -167 -209 -167 -209 -167 -209 -209 -209 -209 -209 -209 -209 -209	+18 +30 -14 -23 -13 -18 -17 -10 -13 +2 -17 -10 -13 +2 -17 -10 -13 +2 -17 -10 -13 +2 -17 -10 -14 -17 -17 -17 -17 -17 -17 -17 -17 -17 -17	+98 +99 +64 +18 +10 -19 -18 -18 -24 -24 -21 -16 -16 +16 +35 +21 +13 +113 +119 +18 +13 +15 +10 -2 +10 -2 +10 -10 -10 -10 -10 -10 -10 -10 -10 -10 -	104 115 130 141 156	+34 +64 -78 -92 +33 -72 +40 +64 +75 +57 -126 -75 -75 -75 -75 -75 -75 -75 -75 -75 -75	+14 -6	+14 +2 +2 +2 +2 +2 +2 +2 +2 +3 +2 +2 +3 +3 +3 +4 +3 +4 +4 +4 +4 +4 +4 +4 +4 +4 +4 +4 +4 +4	+189 +65 +73 -31 -44 +65 +64 +65 +64 +65 +64 +65 +64 +65 +64 +65 +64 +65 +64 +65 +65 +65 +65 +65 +65 +65 +65 +65 +65	+22 -60 -171 +22 +18 +15 +18 +17 -17 +21 +18 +17 -17 -17 -17 -17 -17 -17 -17 -17 -17 -	+205 +246 +165 +402 -37 +61 +53 +140 -21 +129 -21 +129 -246 +29 -10 -22 -44 +95 -10 -10 -10 -11 -11 -11 -11

Dates of end (Saturday) of first calendar week of the year

Year	First week ended	Year	First week ended	Year	First week ended
1920	Jan. 10 Jan. 8 Jan. 7 Jan. 6 Jan. 5 Jan. 10	1926. 1927. 1928. 1929. 1930. 1931.	Jan. 9 Jan. 8 Jan. 7 Jan. 5 Jan. 4 Jan. 3	1932	Jan. 2 Jan. 7 Jan. 6 Jan. 5 Jan. 4 Jan. 9

Table 6.—Excess¹ weekly death rates (annual basis) per 100,000 from influenza and pneumonia, 1930-35

								1000 00						
	About 1	0 citie		he Wes tates	st Nort	h Cer	itral	About 7	cities		West ites	South	Centr	ral
Week of year	Smoothed mean (1930-33)3	1930	1931	1932	1933	1934	1935	Smoothed mean (1930–33) ³	1930	1931	1932	1933	1934	1935
1	48 52 58 62 70 80 88 94 99 106 106 110	+56 +47 +53 +53 +6 -51 -15 +33 +6 -51 -22 -25 -37 -29 -43 -41 +11 -9 -27 -33 +44 -35 +14 -9 -27 -21 -45 -37 -29 -48 +14 -9 -27 -33 +44 -18 -19 -27 -28 -18 -19 -29 -18 -19 -29 -18 -19 -29 -19 -19 -19 -19 -19 -19 -19 -19 -19 -1	+6 +37 +41 +41 +41 +42 0 +35 +112 +93 +84 +30 -13 +108 +93 +47 -5 -11 -15 +33 +47 -7 -3 +410 +410 +35 +410 +410 +410 +410 +410 +410 +410 +410	-38 8 -19 4 -4 4 -4 3 4 -10 -20 -20 -4 1 -25 -20 -21 +11 -25 -29 +11 +12 -25 -29 +11 +12 -25 -29 +11 +12 -25 -29 +11 +12 -25 -29 +11 +12 -25 -29 +11 +12 -25 -29 +11 +12 +12 +12 +12 +12 +12 +12 +12 +12	+261 +140 +156 +79 +811 +211 +212 +44 +34 +34 -44 +33 -10 -30 -14 -18 -1 -1 -16 -29 -16 -29 -16 -29 -16 -29 -16 -29 -16 -29 -16 -29 -16 -29 -16 -29 -16 -29 -16 -29 -16 -16 -29 -16 -16 -29 -16 -16 -16 -16 -16 -16 -16 -16 -16 -16	+86 +28 +45 +45 +45 +45 +45 +45 +45 +45 +45 +45	+58 +103 +166 +160 +170 +170 +170 +170 +170 +170 +170 +17	195 207 215 219 2200 221 215 216 210 208 211 205 216 187 187 183 113 119 107 95 95 90 88 84 81 76 68 66 64 63 65 70 73 74 76 79 88 89 41 102 119 110 119 119 1175	+171 +233 +411 +155 +137 +283 +117 +283 +117 +284 +157 +284 +157 +284 +157 +284 +157 +284 +157 +157 +157 +157 +157 +157 +157 +157	+67 +92 +76 +76 +78 +78 +47 +194 +438 +450 +133 +255 +33 -116 +40 -17 -7 +3 +10 -17 -7 +3 +10 -17 -17 -14 +2 +2 +2 +2 +2 +2 +2 +2 +2 +2 +2 +2 +2	+27 -222 -9 -13 -30 -9 -22 +27 -53 +60 +44 +82 -41 +104 +114 +125 +214 -416 +125 -125 -125 -125 -125 -125 -125 -125 -		+36 -41 -5 -12 -16 -1 +38 -30 -4 -17 -44 -74 -44 -38 -30 -4 -17 -44 -38 -30 -4 -17 -18 -18 -18 -18 -18 -18 -18 -18 -18 -18	+47 -88 0 0 -24 +78 +37 +40 +75 +75 -57 -67 -12 -23 +39 +8 -12 -23 +39 +18 +6 -2 +71 +34 -12 +34 -12 +34 -12 +34 -12 -13 -13 -13 -13 -13 -13 -13 -13 -13 -13
52 53	150	-40 	-21 	+338 +404	-8	+67 		181	+43	-3 	+321 +266	-2	+5	

Table 7.—Excess 1 weekly death rates (annual basis) per 100,000 from influenza and pneumonia, 1930-35

W7 \	Abou	ıt 9 cit	ies ³ in	the M	ountai	a State	ıs	Abou	t 4 cit	ies ³ iı	n the F	Pacific 8	States	
Week of year	Smoothed mean (1930-33) ³	1930	1931	1932	1933	1934	1935	Smoothed mean (1930-33) ³	1930	1931	1932	1933	1934	1935
of	mean (1930-33)* 201 203 214 219 213 212 213 202 219 5188 178 177 164 177 164 100 1001 104 100 1001 104 94 89 81 178 63 63 63 66 67 70	-26 +41 +41 +38 -72 -4 +177 +133 +42 +41 +41 +42 +41 +42 +42 +43 +19 +21 +21 +32 +19 -63 -13 -13 -13 -13 -14 -14 -15 +44 -15 -16 -16 -16 -16 -16 -16 -16 -16 -16 -16	+49 +56 +61 -49 +19 -43 -15 -40 -44 +67 -44 +29 -28 -25 -27 -22 -27 -23 -27 -15 -54 -28 -12 +41 +35 +41 +41 +43 +44 +44 +45 +45 +45 +45 +45 +45 +45 +45	+113 +211 +89 -27 +73 +38 +38 +92 +115 +115 +115 +115 +12 -31 +14 +20 -31 +21 -13 +36 +16 +17 -17 -18 -19 +12 -19 -19 -19 -19 -19 -19 -19 -19 -19 -19	+176 +123 +177 -12 +29 -6 -63 -83 -56 -84 -47 -17 -17 -12 -22 -9 -22 -19 +47 -12 +47 -12 +47 +41 +46 +29 +44 +48 +48 +48 +48 +48 +48 +48 +48 +48	-42 +26 -35 -13 -8 -50 -16 +11 +45 +115 +8 +45 +26 +26 +26 +26 +26 +26 +26 +26 +26 -17 -17 +12 +12 +12 +13 -12 -17 -17 +19 -17 -17 +19 -17 -17 -17 -17 -17 -17 -17 -17 -17 -17	1935 +84 +47 +97 +58 +149 +91 -56 +14 -13 -49 -31 -45 +76 -45 +41 -23 +49 +52 -25 +31 +42 +14 +27 +34 +9 -3 -29 -20 -20 -20 -20 -20 -20 -20 -20 -20 -20	mean (1930-33)* 132 134 135 134 135 136 121 119 119 119 88 91 121 82 73 63 62 60 68 88 57 56 54 52 52 52 52 52 52 52 52 52 52 52 52 52	-18 +11 +32 -38 +111 -45 -46 +15 -15 +48 +17 +18 +21 -31 +8 +6 +44 +18 -10 -15	-1 +13 -16 -18 -19 -49 -48 +14 -20 +14 -15 -16 +15 -17 -11 +15 -10 -11 -11 +2 -11 -13 -13 -13 -13 -14 -15 -16 -17 -17 -17 -17 -17 -17 -17 -17 -17 -17	+56 +55 +48 +26 -14 +17 -27 -21 +15 +6 -15 +7 -2 -23 +14 +17 -0 -4 +18 +3 -18 +3 -18 +3 -18 +3 -18 +48 +48 -18 -18 -18 -18 -18 -18 -18 -18 -18 -1	+68 +128 +128 +27 +37 +46 -46 -43 -20 -20 -20 -20 -8 +7 -18 -19 -9 -8 +40 -2 -20 -20 -20 -20 -20 -20 -20 -20 -20	+3 +7 -14 -6 +6 -18 -15 +2 -2 -6 +3 +4 +21 -3 -19 -2 -3 -19 -2 -3 -11 -2 -4 +21 -12 -2 +2 +21 -2 -3 -3 -10 -10 -10 -10 -10 -10 -10 -10 -10 -10	1935 +22 -38 +26 -17 -25 -25 -22 -6 +36 +46 +9 -19 -10 +24 -7 0 +24 -7 0 +24 -7 0 +24 -7 13 -7 13 -7 13 -7 13 -7 13 -7 13 -7 14 -7 15 -7 -7 -7 -7 -7 -7 -7 -7 -7 -7 -7 -7 -7
38	79 80 88 95 106 118 137 141 152 158 157 161 167 182	+39 -40 +55 -5 +77 -49 +24 +37 +50 +43 +70 -34 +41 -19	+6 -3 -19 -35 +25 -21 -56 +27 +36 +47 +5 -13 -25 +65 +130	-17 -19 +17 -7 +25 +48 +3 +40 -53 +35 +129 +291 +405 +329 +242	-5 +29 -37 -26 -26 -41 +5 -30 -29 -68 -25 +34 -45 +10 -37	+5 -33 -40 -13 +21 +27 -43 +5 -49 -72 +15 +49 +63 -11 +43		43 47 51 53 52 55 63 64 69 78 84 91	+3 +5 -2 -7 +34 +24 -7 +15 -13 +5 -20 -25	+5 +43 +39 +2 +7 +18 +7 -15 -6 +13 -24 +4 +42 +25 -26	-6 -11 -28 -14 -1 +8 +3 -24 +34 +2 +43 +80 +103 +72 +48 +77	-4 +3 +5 -8 +8 -23 -10 +22 +8	-1 -5 -8 -10 +28 +9 -3 +5 -14 +15 -17 -9 -4 -13	

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Mortality from influenza and pneumonia in 50 large cities of the United States, 1910-29. By Selwyn D. Collins, W. H. Frost, Mary Gover, and Edgar Sydenstricker. Pub. Health Rep., Sept. 26, 1930. (Reprint 1415.)

Influenza-pneumonia mortality in a group of about 95 cities in the United States, 1920-29. By S. D. Collins. Pub. Health Rep., Feb. 21, 1930. (Reprint 1355.)

Morbidity in the influenza epidemic of 1928-29. By M. V. Veldee. Pub. Health Rep., May 10, 1929. (Reprint 1282.)

The influenza epidemic of 1926. Pub. Health Rep., Aug. 20, 1926. (Reprint 1104.)

Variations in case fatality during the influenza epidemic of 1918. By Edgar Sydenstricker. Pub. Health Rep., Sept. 9, 1920. (Reprint 692.)

Statistics of influenza morbidity. By W. H. Frost. Pub. Health Rep., Mar. 12, 1920. (Reprint 586.)

Difficulties in computing civil death rates for 1918. By Edgar Sydenstricker and Mary L. King. Pub. Health Rep., Feb. 13, 1920. (Reprint 583.)

The epidemiology of influenza. By W. H. Frost. Pub. Health Rep., Aug. 15, 1919. (Reprint 550.)

Epidemic influenza in foreign countries. By W. H. Frost and Edgar Sydenstricker. Pub. Health Rep., June 20, 1919. (Reprint 537.)

Influenza in Maryland. By W. H. Frost and Edgar Sydenstricker. Pub. Health Rep., Mar. 14, 1919. (Reprint 510.)

A comparison of the mortality rates by weeks during the influenza epidemic of 1889-90 and during the primary stage of the influenza epidemic of 1918 in 12 cities in the United States. Pub. Health Rep., Jan. 31, 1919. (Reprint 502.)

Preliminary statistics of the influenza epidemic. By Edgar Sydenstricker. Pub. Health Rep., Dec. 27, 1918.

DEATHS DURING WEEK ENDED NOV. 9, 1935

[From the Weekly Health Index, issued by the Bureau of the Census, Department of Commerce]

	Week ended Nov. 9, 1935	Corresponding week,
Data from 86 large cities of the United States: Total deaths. Deaths per 1,000 population, annual basis. Deaths under 1 year of age. Deaths under 1 year of age per 1,000 estimated live births. Deaths per 1,000 population, annual basis, first 45 weeks of year. Data from industrial insurance companies: Policies in force. Number of death claims. Death claims per 1,000 policies in force, annual rate. Death claims per 1,000 policies, first 45 weeks of year, annual rate.	7, 730 10. 8 475 44 11. 3 67, 689, 195 10, 029 7, 7 9. 6	7, 986 11. 1 574 53 11. 3 67, 043, 800 10, 802 8. 4 9. 8

PREVALENCE OF DISEASE

No health department, State or local, can effectively prevent or control disease without knowledge of when, where, and under what conditions cases are occurring

UNITED STATES

CURRENT WEEKLY STATE REPORTS

These reports are preliminary, and the figures are subject to change when later returns are received by the
State health officers

Reports for Weeks Ended November 16, 1935, and November 17, 1934

Cases of certain communicable diseases reported by telegraph by State health officers for weeks ended Nov. 16, 1935, and Nov. 17, 1934

	Diph	theria	Infl	uenza	Me	asl es		gococcus ngitis
Division and State	Week ended Nov. 16, 1935	Week ended Nov. 17, 1934	Week ended Nov. 16, 1935	Week ended Nov. 17, 1934	Week ended Nov. 16, 1935	Week ended Nov. 17, 1934	Week ended Nov. 16, 1935	Week ended Nov. 17, 1934
New England States: Maine New Hampshire Vermont Massachusetts Rhode Island Connecticut	1 1 8 1 3	2 4 9 3 3	3	2	85 49 80 19 52	18 28 3 73 1 209	1 0 0 2 0	0 0 0 1 0
Middle Atlantic States: New York New Jersey Pennsylvania East North Central States:	24 20 62	48 30 57	17 9	20 13	350 14 69	702 41 429	5 3 2	8 2 0
Ohio	89 75 73 36 3	132 72 112 21 8	52 23 24 1 43	59 58 22	63 18 14 13 42	159 137 318 46 136	4 1 8 3	1 1 4 2 2
West North Central States: Minnesota	7 23 76 1 5	6 13 84 5 4	1 3 73 5	33 2 1	45 5 31 11 2	140 92 99 43 12	1 1 1 0 0	0 0 2 0 1
Nebraska Kansas South Atlantic States: Delaware	17 26	31 27 1	8	1	47 3 125	9 131	0	0
Maryland ³ District of Columbia	21 15 72 42 74 15 41	18 11 73 77 73 13 45	20 8 147	33 1 328	123 8 1 26 14 9	44 1 139 109 94 13	3 6 0 1 2 0	1 0 1 0 2 0
Florida East South Central States: Kentucky Tennessee Alabama Mississippi Mississippi	21 44 61 44 10	16 96 65 76 30	1 1 16 31	33 34 92	4 7 4 6	218 19 122	0 0 3 4	0 0 1 0
West South Central States: Arkansas Louisiana Oklahoma 4 Texas 3	12 32 25 155	3 25 20 58	13 6 50 92	13 4 35 127	10	4 6 7	0 1 0	0 0 2 2

See footnotes at end of table.

Cases of certain communicable diseases reported by telegraph by State health officers for weeks ended Nov. 16, 1935, and Nov. 17, 1934—Continued

	Diph	theria	Infl	uenza	Ме	asles	Menin men	gococcus ingitis
Division and State	Week ended Nov. 16, 1935	Week ended Nov. 17, 1934	Week ended Nov.16, 1935	Week ended Nov.17, 1934	Week ended Nov. 16, 1935	Week ended Nov. 17, 1934	Week ended Nov. 16, 1935	Week ended Nov. 17, 1934
Mountain States: Montana Idaho. Wyoming Colorado. New Mexico. Arizona Utah ¹ Pacific States: Washington	1 3 13 6 1	1 7 5 4 2	3 1	1 2	22 3 5 3 18 1 3	36 2 107 41 18 23	0 0 1 2 0 2 0	0 0 0 0 2 1 0
Oregon California 3	1 49	1 56	28 52	31 37	153 140	26 50	2 0	0 2
Total	1, 309	1, 448	756	1,011	1,681	4, 015	63	38
First 46 weeks of year	31, 702	34, 015	110, 893	56, 510	707, 296	637, 53 0	5, 001	2,029
	Pelion	yelitis	Scarle	t fever	Sma	llpox	Typhoi	d fever
Division and State	Week ended Nov. 16, 1935	Week ended Nov. 17, 1934	Week ended Nov. 16, 1935	Week ended Nov. 17, 1934	Week ended Nov. 16, 1935	Week ended Nov. 17, 1934	Week ended Nov. 16, 1935	Week ended Nov. 17, 1934
New England States: Maine New Hampshire Vermont Massachusetts Rhode Island Connecticut Middle Atlantic States: New York New Jersey Pennsylvania East North Central States:	3 1 1 10 5 3 22 8 2	1 1 0 2 0 0 0 4 0 3	12 10 13 175 12 27 390 95 395	20 5 125 10 34 288 134 400	0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 4 1 0 2 11 7	4 0 1 5 1 0 12 6 23
Ohio	0 4 3 6 2	8 1 3 6 4	441 176 451 171 311	721 188 513 252 313	0 2 3 0 16	3 0 1 0 17	11 0 6 3 5	10 7 15 9 6
Minnesota Iowa Missouri North Dakota South Dakota Nebraska Kansas	1 2 2 0 1 0 0	4 1 2 0 0 4 1	238 84 125 48 35 77 140	80 64 92 39 25 31 79	0 2 4 2 6 72 11	10 1 6 0 1 0	1 9 3 2 0 0 7	1 3 19 0 3 1 5
South Atlantic States: Delaware	0 1 0 2 0 7 0 1	0 2 0 1 1 1 0 0	6 80 8 74 132 56 11 43 11	5 102 26 127 148 127 12 25	0 0 0 0 1 0 0	0	3 12 1 16 6 3 5 6 4	2 15 1 2 19 6 4 2 3
Kentucky. Tennessee * Alabama * Mississippi * West South Central States:	3 4 2 0	2 0 0 1	59 96 27 13	93 92 38 19	0 1 0 0	0 0 0	14 11 10 6	21 14 7 5
Arkansas	0 2 1 0	0 2 0 2	7 8 13 66	2 20 18 49	0	0 1 1 5	2 11 11 27	11 30 65

See footnotes at end of table.

Cases of certain communicable diseases reported by telegraph by State health officers for weeks ended Nov. 16, 1935, and Nov. 17, 1934—Continued

	Polion	nyelitis	Scarle	t fever	Sma	llpox	Typho	id fever
Division and State	Week ended Nov. 16, 1935	Week ended Nov. 17, 1934	Week ended Nov. 16, 1935	Week ended Nov. 17, 1934	Week ended Nov. 16, 1935	Week ended Nov. 17, 1934	Week ended Nov. 16, 1935	Week ended Nov. 17, 1934
Mountain States: Montana Idaho	0 0 0 4 0	3 0 1 0 1 1	120 63 44 86 23 17 83	17 4 17 173 26 17 31	277 0 2 7 0 0 0	0 0 3 9 0 0	4 2 1 3 9 0	0 1 0 0 14 3 0
Washington Oregon California	1 6 12	. 4 3 21	52 53 250	36 39 164	33 0 0	20 0 1	3 5 14	8 6 14
Total	122	91	4, 927	4, 840	439	80	275	383
First 46 weeks of year	10, 269	6, 962	216, 896	183, 828	6, 313	4, 412	16, 271	19, 303

SUMMARY OF MONTHLY REPORTS FROM STATES

The following summary of cases reported monthly by States is published weekly and covers only those States from which reports are received during the current week.

State	Menin- gococ- cus menin- gitis	Diph- theria	Influ- enza	Mala- ria	Mea- sles	Pella- gra	Polio- mye- litis	Scarlet fever	Small- pox	Ty- phoid fever
August 1935										
Idaho			3		6		1	16	1	17
September 1935										
Colorado	2	41			22		6	168	5	16
October 1935										
Arkansas Florida	2 1	59 81	36 5	195 173	2 19	32 3	1 1	36 23	0	22 6 11 41 13 13
Maine	1	11	5		121		32	57	0	11
Michigan	. 8	62	. 15	9	101		82	543	0	41
Minnesota	10	75	2		52		12	777	4	13
New Jersey	3 20	79 407	18 122	32 3	63 217		96 10	289 1, 331	0	107
Pennsylvania	20 21	234	122	1 4	282		43	1, 209	ő	116
Rhode Island	2	4		L	126		56	49	ŏl	1
South Carolina		332	691	1, 460	10	74	3	45	ŏ	29

New York City only.
 Week ended earlier than Saturday.
 Typhus fever: Virginia, 1; North Carolina, 1; Georgia, 9; Tennessee, 1; Alabama, 13; Texas, 3; California, 2.
 Exclusive of Oklahoma City and Tulsa.

August 1935		October 1935—Continued	1	October 1935—Continue	4
Idaho:	Cases	Epidemic encephalitis:	Cases		Case
Chicken pox	5	Michigan	2	Pennsylvania	- 1
Epidemic encephalitis	i	New Jersey	5	South Carolina	- 1
Mumps	4	Pennsylvania	6	Trachoma:	
Rocky Mountain spotted fever		South Carolina	1	Arkansas	. 1
spotted fever	2	Food poisoning:		New Jersey	- 3
Septic sore throat	10	Oĥio	6	I Onio	- 1
Whooping cough	4	German measles:		Pennsylvania	1
		Maine	15	Trichinosis:	
September 1935		Michigan	19	Maine	1
· •		New Jersey	47	Minnesota	2
Colorado:		Ohio	21	New Jersey	- 2
Chicken pox	31	Pennsylvania	81	Ohio	
Impetigo contagiosa	6	Rhode Island	ĭ	Rhode Island (delayed	
Mumps	70		-	report)	1
Vincent's infection	. 5	Hookworm disease:		Tularaemia:	
Whooping cough	42	South Carolina	66	Minnesota	
		Lead poisoning:	2	South Carolina	i
October 1935		Michigan		Typhus fever:	
Anthrax:	_	Ohio	14	Florida	4
New Jersey	2	Mumps:		South Carolina	ä
Pennsylvania	1	Arkansas	19	Undulant fever:	_
Chicken pox:		Florida	39	Arkansas	3
Arkansas	20	Maine	137	Florida	2
Florida	9	Michigan	131	Maine	ā
Maine	129	New Jersey	186	Michigan	5
Michigan	856	Ohio	378	Minnesota	ž
Minnesota	536	Pennsylvania	787	Minnesota New Jersey	ż
New Jersey	637	Rhode Island	80	Ohio	đ
Ohio	980	South Carolina	55	Pennsylvania	10
Pennsylvania		Ophthalmia neonatorum:		Vincent's infection:	
Rhode Island	35	Ohio	68	Maine	2
South Carolina	13	Pennsylvania	8	Michigan	41
Dengue:	_	South Carolina	13	Whooping cough:	
Florida	3			Arkansas	15
South Carolina	5	Paratyphoid fever:	3	Florida	21
Diarrhea:		Ohio	3	Maine	61
South Carolina	224		•	Michigan	884
Ohio (under 2 years, in-		Puerperal septicemia:	5	Minnesota	108
cluding enteritis)	16	Ohio	۰	New Jersey	575
Dysentery:	_	Rabies in animals:	4	Ohio	420
Michigan (amoebic)	3	Michigan	- 6	Pennsylvania	1, 108
Minnesota (bacillary)	1	New Jersey South Carolina	49	Rhode Island	79
New Jersey (bacillary) -	1		70	South Carolina	38
Ohio (amoebic)	į	Septic sore throat:	48		
Ohio (bacillary)	1	Michigan Minnesota	2		
Pennsylvania (amoe-		Ohio	94		
bic)	1	Rhode Island	5		
Pennsylvania (bacil-		Tetanus:	٠,١		
lary)	8	Michigan	2		
Rhode Island (bacil-	4	New Jersey	ĩ		
lary)	•	146M 1CTDQ1		•	

SMALLPOX IN VALLEY COUNTY, MONT.

A report dated November 20, 1935, stated that since September 15, 1935, there had been 261 cases of smallpox in Valley County, Mont. Most of the cases were in or near Glasgow. The disease was mild.

CASES OF VENEREAL DISEASES REPORTED FOR SEPTEMBER 1935

These reports are published monthly for the information of health officers in order to furnish current data as to the prevalence of the venereal diseases. The figures are taken from reports received from State and city health officers. They are preliminary and are therefore subject to correction. It is hoped that the publication of these reports will stimulate more complete reporting of these diseases.

Reports from States

	Syr	hilis	Gone	orrhea
State	Cases reported during month	Monthly case rates per 10,000 population	Cases re- ported during month	Monthly case rates per 10,000 population
Alahama	802	2.96	316	1. 17
Arizona	54	1. 18	159	8.48
Arkansas 1	286	1.52	110	. 56
California	1.306	2.12	1, 392	2.26
Colorado 2				
Connecticut	171	1.03	143	.86
Delemere	101	4.17	45	1.86
District of Columbia.	145	2.92	156	8, 14
Florida	208	1. 32	75	. 48
Georgia	1, 155	3. 97	431	1.48
Idaho	. 0	Ö	0	Ö
Illinois	1, 293	1.64	1, 183	1.50
Indiana	190	.58	226	. 68
Iowa 1	135	. 54	227	. 91
Kansas	93	. 49	87	. 46
Kentucky	190	. 72	300	1. 13
Louisiana	72	. 33	93	. 43
Maine	24	. 30	46	. 57
Maryland	731	4. 37	261	1.56
Massachusetts	462	1.07	553	1. 28
Michigan	484	. 95	643	1. 26
Minnesota	373	1.43	388	1. 49
Mississippi	1, 326	6.45	2,091	10. 17
Missouri	565	1.54	195	. 53
Montana 1	36	. 67	88	1.64
Nebraska	52	. 37	96	. 69
Nevada ² New Hampshire			26	. 55
New Hampsnire	18 431	. 38 1. 02	383	. 91
New Jersey	96	2.20	145	8, 32
New Mexico ¹	5, 062	3.88	1, 244	.95
New York ¹ North Carolina	1, 065	3. 23	353	1.07
North Dakota	7,003	1.03	12	. 17
Ohio 1	593	.87	271	.40
Oklahoma 1	156	.63	183	.74
Oregon	30	.30	139	1. 40
Pennsylvania.	284	.29	202	. 21
Rhode Island	86	1. 22	63	. 89
South Carolina 3				
South Dakota	5	.07	35	. 50
Tennessee	951	3. 55	526	1. 97
Texas	352	. 58	74	. 12
Utah 1				
Vermont	17	. 47	33	. 91
Virginia 1	310	1. 27	227	. 93
Washington	94	. 58	167	1.04
West Virginia	263	1.47	148	. 83
Wisconsin 4	30	. 10	211	. 70
Wyoming		-		
Total	20, 168	1.64	13, 746	1, 12

¹ Incomplete.

Not reporting.

No report for current month.

⁴ Only cases of syphilis in the infectious stage are reported.

Reports from cities of 200,000 population or over

	Syp	hilis	Gone	orrhea
State	Cases re- ported during month	Monthly case rates per 10,000 population	Cases re- ported during month	Monthly case rates per 10,000 population
Akron, Ohio	23	0. 85	44	1. 62
Atlanta, Ga	226	7.87	134	4.67
Baltimore, Md	414	5. 02	173	2. 10
Birmingham, Ala	148	5. 24	70	2, 48
Boston, Mass	181	2. 29	209	2.64
Buffalo, N. Y.1				
Chicago, Ill	866	2. 43	817	2. 29
Cincinnati, Ohio	63	1. 35	63	1. 35
Cleveland, Ohio	230	2. 47	101	1.09
Columbus, Ohio	63	2.06	23	. 75
Dallas, Tex	84	2.90	16	. 55
Dayton, Ohio	3	. 14	0	.0
Denver, Colo	26	. 88	. 8	. 27
Detroit, Mich	116	. 67	193	1.11
Houston, Tex.2	183	5. 46	47	1. 40 1. 03
Indianapolis, Ind	29	.77	39	. 05
Jersey City, N. J.	0	0	2 17	. 40
Kansas City, Mo	69 419	1. 64 2. 93	362	2, 53
Los Angeles, Calif	207	6.39	330	10. 19
Louisville, Ky	173	6.48	61	2. 28
Milwaukee, Wis	4	.07	19	. 31
Minneapolis, Minn	100	2.06	123	2, 53
Newark, N. J.	230	4.96	156	3, 37
New Orleans, La.3	200	1. 50	-00	
New York, N. Y	1, 012	1. 39	263	. 36
Oakland, Calif	35	1. 15	30	. 99
Omaha, Nebr	26	1. 18	17	. 77
Philadelphia, Pa.	144	. 72	51	. 26
Pittsburgh, Pa.1				
Portland, Oreg	11	. 35	83	2. 64
Providence, R. I	32	1. 24	24	. 93
Rochester, N. Y	83	2.46	45	1. 33
St. Louis, Mo.	760	9. 09	230	2. 75
St. Paul, Minn	38	1. 35	39	1. 38
San Antonio, Tex.3				2.31
San Francisco, Calif	128	1.91	155	2.31
Seattle, Wash	69	1. 82 1. 15	91 36	2. 40 1. 65
Syracuse, N. Y.4	25 57	1. 15	38	1. 05 1. 25
Toledo, Óhio	145	2.92	156	3. 14
Washington, D. C.5	149	2. 92	190	0. 12

No report for current month.
 Data for Jefferson Davis and Hermann Hospitals; physicians of Houston are not compelled to report venereal diseases.
 Not reporting.
 Reported by dispensary and clinics.
 Reported by Social Hygiene Clinic.

WEEKLY REPORTS FROM CITIES

City reports for week ended Nov. 9, 1935

This table summarizes the reports received weekly from a selected list of 140 cities for the purpose of showing a cross section of the current urban incidence of the communicable diseases listed in the table. Weekly reports are received from about 700 cities, from which the data are tabulated and filed for reference.

State and oit-	Diph- theria	Infl	uenza	Mea- sles	Pneu- monia	Scar- let	Small- pox	Tuber- culosis	Ty- phoid	Whoop- ing	Deaths,
State and city	cases	Cases	Deaths	Cases	deaths	fever cases	cases	deaths	fever cases	cases	causes
Maine: Portland	0		0	0	2	0		0	0	6	17
New Hampshire: Concord	0		اها	0	2	1	0	0	0	0	6
Manchester Nashua	0		0	0	2	0	0	1	0	0	9
Vermont:	1		0	0	o	0	0	o	0	0	3
Burlington Rutland	0		0	0	0	0 1	0	0	0	0	10 4
Massachusetts: Boston	3	l	1	6	16	39	0	8	0	5	214
Fall River	1		Ō	0	3	1	Ó	0	Ŏ	0	28 30
Springfield Worcester	0		0	0 1	4 6	4 18	0	0 2	ŏ	3	30 41
Rhode Island: Pawtucket	l								- 1		
Providence	0		0	1	5	2	0	3	0	5	48
Connecticut: Bridgeport	١٠		ا ه	0	3	1	0	1	اه	3	29
Hartford New Haven	0	<u>i</u> -	0	0	3 0	0	0	0 1	1 0	12 8	41 37
New York:			, ,	7	14	32	o	5		6	114
Buffalo New York	28 28	5	1 4	43	101	64	ŏ	80	10	78	1, 305
Rochester Syracuse	0		0	1 6	1 8	8	0	1	0	12 8	67 46
New Jersey:	1		_		1	- 1		į	1		
Camden Newark	1 0	2	0	0	2 5	4 16	0	0 7	1 0	5 32	33 82
Trenton	ĭ		Ō	Ō	2	Ō	. 0	2	0	2	30
Pennsylvania: Philadelphia	6	2	2	28	21	61	0	14	4	62	414
Pittsburgh Reading	2		3 0	1	27	47	0	6	0	24 1	170 23
Scranton	ŏ			ĭ		ž	ŏ		ŏ	Õ	
Ohio:				2	7		0	4	اه	5	133
Cincinnati Cleveland	11 4	18	0	0	13	15 25	0	8	0	45	180
Columbus	8	2	2 0	0 2	2 2	16 13	0	5 3	8	3	95 55
ToledoIndiana:			1	- 1		1		- 1	- 1	- 1	
Anderson Fort Wayne	2 14		0	0	2 2	9	0	0	0	6	. 10 21
Indianapolis	9		0	1	8	12	0	7	0	19	108
Muncie South Bend	0		0	3 0	1	3 2	0	0	0	8	12 13
Terre Haute	ŏ		Ŏ	ŏ	ō	2	Ö	0	0	0	18
Alton	7		0	0	0	6	0	.0	1	.0	5
Chicago Elgin	18 0	2	2 0	10	46	175	0	35	8	74 0	672 11
Moline	0		Ó	Ó	1	0	0	8	0	1 1	9 19
Springfield Michigan:	0		0	0	1	•	1	- 1	1	- 1	
Detroit	10 2	1	0	5	13	41 12	8	16 2	0	124	212 24
Flint	ő		8	8	2	10	ŏ	î	ŏ	ž	27
Wisconsin: Kenosha	1		0	1	0	5	اه	o	0	14	3
Milwaukee	0		Ŏ	i	6	37	O I	8	0	113	91
Racine Superior	8		0	0	1 1	18	8	0	8	8	11 11
Minnesota:							-	ł		j	
Duluth	0		0	9	4	3	o l	1	0	5 8 5	27 94
Minneapolis	7		2	4	8	67 31	8	2 2	1	0	56

City reports for week ended Nov. 9, 1935—Continued

State and city	Diph- theria cases		Deaths	Mea- sles cases	Pneu- monia deaths	Scar- let fever cases	Small- pox cases	Tuber- culosis deaths	Ty- phoid fever cases	Whooping cough cases	Deaths, all causes
Iowa: Cedar Rapids Davenport Des Moincs Sioux City Waterloo Missouri:	0 1 2 0 7		0	0 0 0 0 1	0	4 5 6 2 9	0 0 0 0	0	0 0 0 0	1 0 2 0 1	29
Kansas City St. Joseph St. Louis North Dakota:	3 4 16	i	0 0 0	0 0 3	8 1 7	6 2 22	0 0 0	2 1 3	0 0 0	1 0 5	82 5 184
Fargo	1 0 0		1 0	0 0 0	0	8 4 0	1 0 0	0	0 0 0	0 2 0	9 7
Aberdeen Nebraska:	0		0	0 2	4	1 21	0 2	1	0	3 0	 FO
Omaha Kansas: Lawrence	5 0		0	0	0	1	0	0		0	58 3
Topeka Wichita	<u>i</u> -		0	1	5	i		<u>i</u>	0	1	38
Delaware: Wilmington	0	ļ	0	0	0	1	0	0	o	3	22
Maryland: Baltimore Cumberland	4 3	2	0	2 0 0	9	24 2 0	0	11 1 0	1 0 0	12 0 0	194 9 4
Frederick District of Col.: Washington	18	1	1	2	12	10	0	8	1	1	152
Virginia: Lynchburg	1		0	0 3	0	0 3	0	0 2	0	8	10 27
Norfolk Richmond Roanoke	1 5 2		1 0	ő	5	4	0	5	0	ŏ	51 9
West Virginia: Charleston Huntington	4	1	1	0	2	1 10	0	0	0	4 0	20
Wheeling North Carolina:	1		0	0	5	5	0	0	0	0	11 5
Gastonia Raleigh Wilmington	0		0	1 0	. 1	0	0	0	0	0	11 11
Winston-Salem . South Carolina:	0		0	0	2 2	4 0	0	0	0	0	14 24
Charleston Columbia Florence	0 1		0	0							5
Greenville Georgia:	0		0	0	3	1	0	0	0	0	9
Atlanta Brunswick Sayannah	9 0 3	10	0	0	8 0 3	14 1 2	0	1 0 2	0 0 1	0 -	4 33
Florida: Miami Tampa	3		2 0	0	2 3	2 3	0	2	0	0	24 27
Kentucky:	6			0		2	0 -		1	0 -	
Covington Lexington Tennessee:	0 2		0	0	2	1	0	1	2	2	7 18
Knoxville Memphis Nashville	5 3 4		1 2 0	0 0 1	2 5 3	0 9 6	0	6 0	0 3 1	0 7 0	37 86 39
Alabama: Birmingham Mobile Montgomery	7 5 2		0	0	4 3	2 2 1	0 -	3 2	0 1 0	0 1 1	55 20
Arkansas: Fort Smith	1			0 -		0	0 -			0	.
Little Rock Louisiana:	2		0	0	4	4	0	2	0	0	6
New Orleans Shreveport	15	3	0	9	12 5	5	0	15	0	14	128 40

City reports for week ended Nov. 9, 1935—Continued.

State and city	Diph- theria		luenza	Mea- sles	Pneu- monia	Scar- let fever	Small- pox	culosis	Ty- phoid fever	Whooping cough	Deaths,
	cases	Case	Deaths	cases	deaths	cases	C8.56S	deaths	cases	cases	causes
Oklahoma: Oklahoma City	2	17	0	0	5	3	0	0	. 0		38
Texas:	_			i -	i -	_	1		1	0	
Dallas Fort Worth	13 15	1	1 0	0	10	8 7	0	3 0	0	1 0	78 38 14 69 55
Galveston	i		. o	Ó	Ŏ	0	Ō	1	Ŏ	Ó	14
Houston San Antonio	12 2		0	1 0	3 4	8 4	0	9	0	0	69 55
Montana:	0			0	0	16	. 0		0	١.	۱.,
Billings Great Falls	Ó		. 0	Ŏ	0	0	. 0	Ö	ŏ	1 1	1 1/2
Helena Missoula	0		0	0 11	0	0 33	0	0	0	0	13 2 5 11
Idaho:	Ĭ				- 1						1
Boise Colorado:	0		. 0	0	1	1	0	0	0	0	8
Colorado Springs Denver	0 5		0	1 2	2 6	13 11	0	0	0	3	12 89 7
Pueblo	i		ŏ	ő	ŏ	20	ō	i	ŏ	3	27
New Mexico: Albuquerque	0		ا ا	0	1	4	0	4	0	ا ه	11
Utah:	•					42			_	ľ	
Salt Lake City. Nevada:	0		0	3	4	42	0	2	0	9	32
Reno											-
Washington:		ŀ				.,					
Spokane	0		1 0	2 4	6 2	19 3	0 1	3 1	0	0 7	67 46
Tacoma	0		0	0	3	2	0	0	Ō	Ò	26
Oregon: Portland	0	1		12	8	14	0.	5	0	0	97
SalemCalifornia:	0			0		3	0		0	1	
Los Angeles	10	16	2	12	17	45	0	14	3	9	318
Sacramento San Francisco	9	9	0 1	0 16	9	16 14	0	2 6	0	1 19	33 178
-		<u> </u>			1						
. State and city	N	fening meni	ococcus ngitis	Polio- mye-	.	State	nd city	- 1	Mening meni	ococcus ngitis	Polio- mye-
. Sease and City		ases	Deaths	litis cases			ina city	-	Cases	Deaths	litis cases
	_				-			-			
					11					- 1	

State and city		gococcus ingitis	Polio- mye- litis	State and city		gococcus ingitis	Polio- mye- litis
	Cases	Deaths	Cases		Cases	Deaths	cases
Massachusetts: Boston Fall River	0	0	8 2	Kansas: Wichita Maryland:	0	0	1
Worcester	ŏ	l ŏ	í	Baltimore	2	2	1
Rhode Island: Providence	0	0	1	District of Columbia: Washington	2	0	1
New York: Buffalo	1	اها	0	Virginia: Richmond	1	0	
New York	8	4	ğ	Georgia:	-	١	•
Syracuse	ŏ	ō	4	Atlanta	3	0	1
New Jersey:				Tennessee:			_
New Jersey: Newark	0	0	6	Memphis	0	1	0
Pennsylvania:		ا ما	_	Louisiana:	_	_ [
Philadelphia Ohio:	3	0	5	New Orleans	2	0	1
Cincinnati	2	اه	0	Texas: Galveston	0	2	•
Columbus	ñ		ŏ	Montana:	۰		v
Illinois:	•	- 1	١	Missoula	1	0	0
Chicago	7	3	0	Colorado:	-		•
Michigan:		_		Colorado Springs	0	0	1
Detroit	1	1	1	Washington:		- 1	
Iowa:		_ [_ [Tacoma	0	0	1
Waterloo	0	1	0	California:			_
Missouri:			ا م	Los Angeles	1	0	1
Kansas City	1	0	0	San Francisco	0	0	8
St. Louis	1	0					
1				·	!		

Epidemic encephalitis.—Cases: Springfield, Mass., 1; Pittsburgh, 1; Chicago, 1; Detroit, 1. Pellagra.—Cases: Winston-Salem, 1; Atlanta, 1; Savannah, 2; San Francisco, 1. Typhus fever.—Cases: Charleston, S. C., 2; Atlanta, 5; Savannah, 2.

FOREIGN AND INSULAR

CANADA

Provinces—Communicable diseases—2 weeks ended November 2, 1935.—During the 2 weeks ended November 2, 1935, cases of certain communicable diseases were reported by the Department of Pensions and National Health of Canada as follows:

Disease	Prince Edward Island	Nova Scotia	New Bruns- wick	Que- bec	Onta- rio	Mani- toba	Sas- katch- ewan	Al- berta	British Colum- bia	Total
Cerebrospinal meningitis Chicken pox	i	3	1 42 6	1 250 89	1 801 14 2	1 170 14	63 11	44 2	119 3	1, 490 142 2
Erysipelas Influenza Lethargic encephalitis		1 11	2	9	7 104	3 2 1		1	3 27	24 146 1
Measiss. Mumps. Paratyphoid fever	13	30 2	292	300	507 228 3	13 121	61 971	14 3	105 99	1, 395 1, 452 6
Pneumonia				2	27	4	<u>2</u>	5	16	43 16
Scarlet feverSmallpox	5	22	7	306	341	104	36	38	54 1	913 1
TrachomaTubesculesisTyphoid fever	3	2 2	19 12	92 81	100 16	30 11	5	5 2	25 1	2 276 130
Undulant fever		29	32	96	267	53	63	10	1 28	5 578.

JAMAICA

Communicable diseases—4 weeks ended November 2, 1935.—During the 4 weeks ended November 2, 1935, cases of certain communicable diseases were reported in Kingston, Jamaica, and in the island outside of Kingston as follows:

Disease	Kings- ton	Other locali- ties	Disease	Kings- ton	Other localities
Chicken pox Dysentery. Erysipelas Leprosy	1 14	3 1 2 1	Puerperal fever Tuberculosis Typhoid fever	29 19	1 71 10 6

(1699)

NEWFOUNDLAND

Vital statistics—1934.—Following are vital statistics as published in the annual report of the Registrar General of Births, Marriages, and Deaths, for Newfoundland, for 1934:

	Num- ber	Rate per 1,000 popula- tion		Num- ber	Rate per 1,000 popula- tion
Population Total births Live births Stillbirths Deaths.	293, 923 6, 905 6, 746 159 3, 652	23, 49	Deaths from—Continued. Congenital debility Gastro-enteritis (under 2 years) Heart disease.	296 60 198	1. 00 . 20 . 67
Deaths under 1 year 1 Deaths from: Apoplexy, paralysis, and epilepsy Bronchitis Cancer	706 185 48 246	2, 40 . 63 . 16 . 84	Infantile convulsionsInfluenza	154 47 59 32 235 552	.52 .16 .20 .11 .79 1.88

¹ Deaths under 1 year per 1,000 births, 102.82.

PERU

Lima—Influenza.—According to information dated September 27, 1935, the third epidemic of influenza this year had occurred in the Lima district. Many cases of illness with high fever and attacks in the throat and bronchial tubes were prevalent. However, schools had been reopened after having been closed for 1 week.

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER

From medical officers of the Public Health Service, American consuls, International Office of Public Health, Pan American Sanitary Bureau, health section of the League of Nations, and other are regards either the list of countries included or the figures for the figures for the particular ecountries of which reports are given.

CHOLERA

[C indicates cases; D, deaths; P. present]

					Î			Ī									
			ļ	į						Week	Week ended-						
Place	Apr. 27, 1935	May 1935	700 1036	30- 30- 30- 37-1935		Augr	August 1935			82	September 1935	er 1935			October 1935	1935	
					€0	01	11	2	31	7.	71	12	88	10	12	19	8
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	300			7			Ħ	Ħ									
India	ឌុះ	19, 176	24, 379	25, 494	268		•	÷	-	14, 187	13, 950	ii			Ħ		
Assam			1,212	; 883	285	885	282	348	2 2 2 3 3 5 5 5 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	82	822	ន្ត	Ξξ	Ì	121	32	222
Bassein	• —	388	3 -	24	1	1	\$	3	3	3	3	70	2		3	9	8 :
	200 258	288	218	1,328	1,039	1, 145	1,390		1,491	1,632	2,403	2,087	1,657	1,284	208		
		828	704	522	~ 25	20		- 28	. ×	Ç.	3	3,22	2-1	2	8	8	: :2
	001	1, 112	4,622	3, 732 8	88	930	1.284		2,561	3, 424	2, 565	2,722	3,063	2, 472	1, 723	1,580	3
	101-	1,468	2, 583	2,972	1,652	1,536	1,248	1,500	1, 551	1,806	2 199	2,350	œ	2	4		
Madras	100 1, 1,	i_	1, 15	- 2 % & £	≦8£	ន្តនះ	222	128	22.20	0.0	8 6	28,	00 6	63	8	63	7
	000	-	· *	3	₫ ¬	3	•	1	•	9	*	٥	N				
Northwest Frontier Province	000								88	57	113	23	Ī	2		67	
Punjab. Rangoon	200	2	142	252	9	88	142	156	នដ	176	\$ 12	88	8	12	24.2	8	40
11	37																
Imported.																	

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER-Continued

CHOLERA—Continued

[C indicates cases; D, deaths; P, present]

			•					•									
			1	į						Week	Week ended-						
Place	Apr. 27. 1935	May 25, 1935	June 1935	30- 30- 30- 30- 30- 30- 30- 30- 30- 30-		Aug	August 1935			,	September 1935	er 1935			October 1935	1935	
					m	22	11	*	128	7	11	21	88	29	12	10	8
India (French): Chandernagor	8-	15	7	7	12	4				-				-			
		5	9	64	10	1	9 -	69	24	22	8	စ	ន	192		-	
			-						-								
Rizal Province			eo -		1				-								
Siam: Ang Thoang Province C			1											67	64	-	10
Ayudhaya Province										100	17	0	17	91-	00 00	00	→ 53 ;
	<u> </u>			9	6	6		0	7	enen 17	227	-110	180 eo	320	-21-	- 00	222
Nondpuri Province Pradumdhani Province Rajpuri Province					6	20	88	88	10	7	9	72	8	-2	6 6	64-	= -
Singhpuri Province. Singhpuri Province. Smudprakar Province. Candosgran Province. Candosongram Province.						-8	133	171	181		24.8	1 9	8-10	a	w-440	1221	00 F
S. S. Ethiopia at Madras from Rangoon C S. S. Ellenga at Rangoon S. S. Bodnant at Calcutta		-100															

1702

S. S. Raylora at Calcutta														
D)		May 1935	2		June 1935		-	July 1935		٧	August 1935	8 2	September 1935	er 1935
F 180-8	1-10	1-10 11-20	21-31	1-10	1-10 11-20 21-30	21-30		1-10 11-20	21-31	1-10	11-20	21-31	1-10 11-20 21-31 1-10	11-20
Indo-China (French) (see also table above): Cambodia 4	11288	80 40	1 24	4438	9000	6 11 3	6161		6469		22	ma	22	

² During the period Apr. 20 to July 9, 1935, 98 cases of cholera with 95 deaths were reported in Kanchanapuri Province, Siam. ⁸ Suspected.
⁴ Reports incomplete.

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER-Continued

PLAGUE:

			ras castos	Lo marcarda Carcos, Lo, desamo, 1, presente	i v 'on	T COMPTE											
									Wee	Week ended—	- p						
Place	Mar.31- Apr. 27, 1935	Apr. 28 May 25, 1935	May 26-June 29, 1935	May June 30- 26-June July 27, 29, 1935 1935		Aug	August 1935	29		ž	ptem	September 1935			October 1935	r 1935	
					က	10	17	*	31	7	14	21	88	2	12	19	8
Algeria: Philippeville		1															•
		- 6															
Plague-infected rats Belgian Congo. Tygue-infected rats Bollyia. (See table below.)		Д.		60		64					63			-		89	
Brazili 4 British Bast Africa: Uganda	8	111	340	252	5.5	ဗာဏ္က	∞8	-4	æ 2	ల స్ట	7.7	= 8	ଧ୍ୟ	ကတ္	ę		
	8 41	181	2 8		5	8	28 e/ e/	\$	=	8	\$ e4	23 21	å 44		33		
	7			60								1 1 1		1		100	=
Fuking Province—Chuanchow. Manchuria. Dutch East Indies: West Java.	829	999	35	169	25	171											
Ecuador (see also table below): Guayaquil	678	2	3	88	3 5	22 -		-	-	-	-	-	8	•	7	•	•
Plague-infected rats									T	63.63	-	61	-8	64	∞	∞ ⊣	44

Including plague in the United States and its possessions at Leventue, Pamps Territory, Argentina, during 2 months.

A report dated Aug. 2, 1935, states that dasse of plague occurred at Leventue, Pamps Territory, Argentina, during 2 months.

A report dated Aug. 2, 1935, states that plague-infected rats are present at San Luis, Argentina.

A Reports of plague in Brazil have been received under the dates indicated, as follows: 1 July 25, 1935, 4 cases at Tanguinho, Santa Barbara, Bahia State, July 28, 10 cases Bahia State States in Co. 11, 7 cases near Bomfin, Bahia State, during September: during October 1836, 3 cases at Tanguinho, Santa Barbara, Bahia State, July 26, 10 cases in Ceara State since Jan. 1; Sept. 10, 204 cases with 72 deaths in Pernambuco State up to Aug. 24; Oct. 8, 4 cases and 1 death at Paulista, Piauhy State.

• A report dated July 4, 1935, states that 76 cases of plague with 88 deaths were reported at Chuanchow, Province of Fukiang, China.
7 A report dated Sept. 21, 1935, states that up to Sept. 17, 144 deaths from plague were reported in the provinces of Kirin, Lungkiang, Fengtien, and South Hsingan, Manchuria,

During the week ended Nov. 2, 1935, 2 plague-infected rats were reported at Enkaiau, Hamakus District, Hawaii Island, Hawaii Territory. China.

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER-Continued

PLAGUE-Continued

									M ₈	Week ended-	ļ Å						
Place 1	Mar.31- Apr. 27, 1	Apr. 28- May 25, 1935	May 26-June 29, 1935	June30- July 27, 1935		₩	August 1935	88		, z	ptemb	September 1935	_		October 1935	r 1935	
					m	10	17	22	28	7	4	21	88	100	21	91	8
lraq Baghdad Baghdad Baghdad Baghdad Baghdad Province Madagascar. (See table below.) Mogador Baff Region Saff Region Baff Region Cape Province Cape Province Cape Province Cape Province Cape Province California—Plague-infected ground squirrels: Mode County Mode County	480 0	3 1 1 1 1 1 1 2 2 2 3 3 3 3 3 3 3 3 3 3		0 1 1000 01 1	(S)		-		-	м н	4- 0	69	9 •	a			
Montana—Dillon—Plague-infected ground squirrels. Orgon—Plague-infected ground squirrels. Irant County Vallowa County On vessel: S. S. Ipanema at Marseille	1	10 1 2	1	7 11 6												13.2	

Sep- tember 1935	8 111
August 1936	∞ωα να δα- 4 22\$
July 1985	2 1 22 24.44
June 1935	4
May 1935	9 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
April 1935	g 9 9 24 7 20 3
P1809	Peru-Continued. Lima Department Callao. Callao. Plague-infected rats Chima Plague-infected rats Chima Plague-infected rats Chara 14 Chara
st tember 1935	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
August 1935	2 1 88.00 8.40 0 1 1 88.00
July 1935	112 102 104 4
June 1935	2 21 2 2 2 2 4 8 8 8 4
May 1935	7 4 4 6 9 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
April 1935	82 82 83 83 83 83 83 83 83 83 83 83 83 83 83
Place	Argentina (see also table above): Jujuy Province. Panina Territory—Victorica. Santiago de Estero Province. Frias. Azores. Bolivia. China: Kwangchowan. Candoc'ina (see also table above): Cambodia. Naotchao Island. Madagascar (central region). Deru. Libertad Department.

For 2 weeks.
 Pague-infected wood rat.
 Includes 1 suspected plague-infected squirrel.
 Includes 1 suspected.
 Includes 1 suspected.
 Includes 1 plague-infected rats were reported found on board the crew and the other was a stevedore believed to have worked on the vessel. Several plague-infected rats were reported found on board the rate was a member of the crew and the other was a stevedore believed to have worked on the vessel. Several plague-infected rats were reported.
 Include Includ

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER-Continued

SMALLPOX

			9682 693	O indicates cases; D, destus; F, present	4 (SI113)	, prese	11										
	Mar.	Apr.	May	June						≱	Week ended—	ļ į				·	
Place	31- 27,	Kay S,	¥ ₂ 8	हें इंद्र		Ψn	August 1935	88		σ ₂	eptem	September 1935			Octobe	October 1935	
	1935	1935	1935	1935	8	10	17	22	31	7	14	21	83	20	12	18	82
Algeria: Algiers Department. Constantine Department. C Argentina. Beigian Congo. (See table below.) Bollyia. (See table below.)		1	2	1								2					
Brazil: Proto Alegre (alastrim)		82 62 62	241 288	17	16		61 10	51	01	17	1 4	o	1 1				
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British Columbia Manitoba Ontario Quebec. Saskatchewan Canary Islands: Santa Cruz de Tenerife Ceylon: Colombo.	32	e e	1							e		12		11			<u> </u>
China: Canton Canton Dairen Foodnow Control Foodnow F	4047011	24-23	4 800	• α ∞ _Ω , ¬	· -	P4		- P4	-	Pr I		P4		A		A I	

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000000 000 2	8	0 45, 588 37, 507 39, 0 822 84, 288 7, 207	10,497 11,970 11,970 11,970 11,830 12,57 12,530 13,100 100 100 100 100 100 100 100 100 100	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	133 443 56 56 56 56 56 56 56 56 56 56 56 56 56
000000 000 2	8	0 45, 588 37, 507 39, 0 822 84, 288 7, 207	D 1970 17, 188 5, 1897 17, 1898 18, 1898 18, 1899 18, 189	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	133 443 56 56 56 56 56 56 56 56 56 56 56 56 56
000000 000 2	8	0 45, 588 37, 507 39, 0 822 84, 288 7, 207	D 1970 17, 188 5, 1897 17, 1898 18, 1898 18, 1899 18, 189	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	133 443 56 56 56 56 56 56 56 56 56 56 56 56 56
000000 000 2	8	0 45, 588 37, 507 39, 0 822 84, 288 7, 207	D 1970 17, 188 5, 1897 17, 1898 18, 1898 18, 1899 18, 189	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	133 443 56 56 56 56 56 56 56 56 56 56 56 56 56
000000 000 2	8	0 45, 588 37, 507 39, 0 822 84, 288 7, 207	D 1970 17, 188 5, 1897 17, 1898 18, 1898 18, 1899 18, 189	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	133 443 56 56 56 56 56 56 56 56 56 56 56 56 56
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CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER-Continued

SMALLPOX—Continued [C indicates cases; D, deaths; P, present]

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	Mar.	Apr.	Мач	June						Week	Week ended-	1					
Place	Apr. 27,	Kay 85,	ងផ្លួន	8 g.c.		Yng	August 1935	_		Seg	September 1935	r 1935		°	October 1935	1935	
	1836	1836	1935	1938	60	9	11	22		-	71	21	88	20	21	2	8
India (French): Chandernagor Karikal Pondichery	9829	4 10 59	386	. 25:	∞ ⇔	, se	221	42	448	17 21	. 61616	-0		<u> </u>			
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Osaka. Taiwan Lithuania. Maxico (see also table below):	-	-		1													
Chihushus Quadalajara Maratlan Maratlan Marion	= -:	1.7	9	64				-			67				Ш		-
elow.)	501-1	8	100	2 61	<u> </u>	9	0 8	•	•	ρ (N	<u> </u>	N			ΪΪ	-	
Mozam Dique. (See table below.) Nigeria. Lagos Niger Territory. (See table below.)	380	292	288	43		22	=	\$	<u> </u>	272	8	#	\dashv	$\dashv \vdash$	$\overrightarrow{\parallel}$		

1710

Nyasaland. (See table below.) Palestine Peru. (See table below.)		80			+						$\overline{}$		$\frac{\cdot}{}$		$\frac{1}{1}$	
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Oporto. C Portuguese East Africa.	2	-12	-	61			11	<u> </u>								
Salvador. (See table below.) Saudi Arabia		8	14	2-4	-		<u>:</u> :	<u> </u>			$\frac{\cdot}{1}$			+	i	ļ
Sign. Dangava.	196	64 31	31	4.	382	165 184 1149 1139	165	25		149		139				
Spain Settlements: Singapore	36	జ్ఞల	45	82		104	-2-		64	1	9				٠,	
Sudan (Anglo-Egyptian).	8-	•	9	2 2		1	_ •	20	39		Ħ	$\frac{1}{11}$				
Tunisla		1					$\frac{11}{11}$	<u> </u>			Ħ	H	H	4	H	
Turkey. (See table below.) Union of Soviet Socialist Republics. (See table below.)																

³ For 2 weeks. 4 A report dated June 11, 1935 states that 10 deaths from smallpox had occurred at Mizuna Migitu Prefecture, Japan. ⁵ For 3 weeks.

On vessels—Continued.	S. S. Anshun at Singapore from Hong Kong.	S. S. Cremer at Singapore from Amoy	S. S. Van Heutez at Singapore from Amoy.	S. S. Chitose Maru at Nagasaki from Dairen.	1935 S. S. Perala at Aden from Massawa	S. S. Englistan at Rangoon from Gonalpore.	S. S. Hong Kheng at Singapore from Amoy.	S. S. Barenfels at Gibraltar	8. S. Talamba at Rangoon from Madras.	
	. Apr. 3, 1935	Apr. 3, 1935	Apr. 12, 1935	Apr. 12, 1935	Apr. 17, 1935	Apr. 18, 1935	Apr. 19, 1935	. May 10, 1935	1 case May 29, 1935	
	1.088	L case.	l case.	1 case.	l case.	1 case.	l case.	l case.	1 case.	
On vessels:	om Miike	S. S. Ozarda at Tuticorin from Akyab						S. S. Napasaki Maru at Nagasaki from Shanghai		

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER-Continued

SMALLPOX-Continued

September 1935	31
August 1935	33 33 33 34 3 3 3 3 3 3 3 3 3 3 3 3 3 3
July 1935	1.444 6 6 6 1444 6 6 6 6 6 6 6 6 6 6 6 6 6
June 1935	1140 1180 1180 12 2 2 2 2 2 2 2 3 3 3 3 3 3 3 3 3 3 3 3
May 1935	797 797 797 797 797 797 797 797 797 797
April 1935	246 248 248 248 248 248 248 248 248 248 248
Place	Mexico—Continued. Mexico State Mexico D. F Morelos State Nuevo Leon State Oaraca State Puebla State Querefacto State San Luis Foted! Oaraca State Ruebla State Ouerefacto State San Luis Foted! Over Cruz State Over Cruz State Oaraca State Over Cruz State Oaraca State
Septem- ber 1935	303 577 6 6 6 6 6 103 163
August 1935	88 8 1 1 8 8 8 8 8 1 1 1 1 1 1 1 1 1 1
July 1935	197 477 477 77 77 77 88 811 811 11 11 11 12 88
June 1935	108 44 140 102 102 12 13 13 13 10 10 10 10 10 10 10 10 10 10 10 10 10
May 1935	165 33 157 20 3 11 15 53 45
April 1935	151 36 211 19 11 18 8 6 6 8 8

[C indicates cases; D, deaths; P, present] TYPHUS FEVER

																			1
	Mar.	Apr.	May							A	Week ended-	-pep							
Place	31- 27,	Zay Zay	Zang Sang		July 1936	935			Augu	August 1935	5		Se	ptemb	September 1935		Oct	October 1935	335
	1935	1935	1936	9	13	8	27	8	10	17	78	ಷ	7	7	21	88	3	12	91
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	63	2 6	9	i	-	-	$\overrightarrow{1}$	$\dagger\dagger$	$\dagger \dagger$	$\overline{\parallel}$	$\frac{1}{11}$	$\frac{1}{1}$	$\dagger \dagger$	Tİ	-			-	
Bouthern Trillories. Australia: Queensland	9 00	18	•		II-	3 -		\Box	11-				$\frac{1}{1}$						
Besutoland. Beliatan Conge. Bolivia. (See table below.)				Ħ	$\frac{1}{1}$	$\overline{\parallel}$	=	$\dagger\dagger$	$\dagger \dagger$	Ħ	$\overrightarrow{\parallel}$	$\overrightarrow{\Pi}$	$\frac{1}{11}$	Ħ	ÌÌ	Ì		1	
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Tientsin	64	9	- 2	-				-	-			4	7 -		63				
1 For 3 weeks.				•			•	•	•	•	•	-	•	•	•	•	_	_	_

For 2 weeks.
For 4 weeks.
For 4 weeks.
For 4 weeks.
For 4 weeks anded Mar. 9, 1935, 11 cases of typhus fever were reported at San Jose nitrate camp about 42 miles from Iquique, Chile.
A report dated June 25, 1935, states that about 400 cases of typhus fever occurred at Harbin, Manchuria, China.

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER-Continued

TYPHUS FEVER—Continued [Cindicates cases; D, deaths; P, present]

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	Mar.	Apr.	May							We	Week ended—	- pe							
Place	31- Apr. 27,	May 25,	8 gg &		July 1935	935			Augu	August 1935			Set	September 1935	ır 1935		Oct	October 1935	35
	1936	1935	1935	•	13	8	72		10	17	*	31	1	=	1Z	88	10	12	61
Czechoslovakia, (See table below.) Egypi: Alexandria Asyut. Conk County—Catletown. Cork County—Catletown.	22	82 44 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	22 28 2 2 11 11 2 1 2 2 2 2 2 2 2 2 2 2	1 1 8 8 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0 14-1 10 0 1 1-Q		1 10 1 10 10 10 10 10 10 10 10 10 10 10		8 1 14 11 11 8		H H 100 H 101 H 100 H 12 H 100 H	1 10 01 1 1 10	60 60	1 1 2 1 9 1 9 1	4 80-1 -1 6	- 63 69	r	9 9 9	
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64	112	87		597	3	w <u>t</u>	3 2	222		
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	Morocco Palasting:			Peru. (See table below.)	•		Trains-Jordan Tunisa	Provinces. Turkey. (See table below.)	Union of Soviet Socialist Republics. (See	Yugoslavia. (See table below.) On vessel: S. S. Agamemnon at London C

Imported.
 Includes 3 imported cases.

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER-Continued

TYPHUS FEVER-Continued

Delivia Marchuria Harbin C 86 127 111 114 150 140 Mexico (see also table above) C 188 254 135 40 25 135 40 C 188 254 135 40 C 22 C 24 43 C 24 24	Place	April 1935	May 1935	June 1935	July 1935	August 1935	Septem- ber 1935	Place	April 1935	May 1935	June 1935	July 1935	August 1935	Septem- ber 1935
198 254 135 40	00	8	127	111	114	150	140	Mexico (see also table above)—Con.				"	"	
35 7 6 22 24 43 San Luis Potosi State. D D D San Luis Potosi State. C C San Luis Potosi State. C C San Luis Potosi State. C C San Luis Potosi State. C C San Luis Potosi State. C C San Luis Potosi State. C C San Luis Potosi State. C C San Luis San Luis Potosi State. C C San Luis San Luis San Luis Potosi State. C C San Luis San Lui	0000	198 13	8 254	135	48	· ·		Puebla State			4	01-10	0,	
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Second Second	סכ			1	9 0	9		Union of South Africa:	8	3	*	3	35	3
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95 178 159 Transval C 83 12 25 3 3 4 5 5 5 5 5 5 5 5 5	30			· ·	-6	- 5	-	Orange Free State	8 8		67 5	7.53	4.5	
59 1170 155 Union of Soviet Societist Republics. C 8,414 7, 196 4,643 Yugoslavia. Tugoslavia. C 104 64 131 49	O			92	178	159		Transvaal	38	121	3 23	~ °	, °	
D	96	25		6	021	155		Union of Soviet Socialist Republics. C	8,414	7, 196	4,643		č	-
				1		9		A ugostavata	5	\$	101	2	7	‡

YELLOW FEVER

[C indicates cases; D, deaths; P, present

	,		;							Wee	Week ended-	Ţ						
Place	Mar. 31- Apr. 27, 1935	Apr. 28- May 5, 1935	May 26- June 29, 1935		July 1935	1935			Αu	August 1935	35		ŭ	September 1935	er 193		October 1935	r 1935
				9	13	20	22	8	10	17	24	31	2	14	21	88	5	12
Bolivia: Santa Cruz Department—Chuchio.¹ Brazil: Goyaz State			8															
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Bawku									-						1			e ! !
Kourne C Sokode C																		

During the month of June 1835, 1 case of yellow fever was reported at Chuchio, Santa Cruz Department, Bolivia. Suspected.
During the week ended Oct. 26, 1935, 1 suspected case of yellow fever was reported at Koutiala, French Sudan.

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